

General Assembly

Amendment

January Session, 2017

LCO No. 8262



Offered by:

REP. STEINBERG, 136th Dist.

REP. SRINIVASAN, 31st Dist.

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SEN. SOMERS, 18th Dist.

To: Subst. House Bill No. **7222**

File No. 594

Cal. No. 396

"AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES."

- 1 Strike everything after the enacting clause and substitute the
- 2 following in lieu thereof:
- 3 "Section 1. Subsection (a) of section 19a-491 of the general statutes is
- 4 repealed and the following is substituted in lieu thereof (Effective
- 5 *October 1, 2017*):
- 6 (a) No person acting individually or jointly with any other person
- 7 shall establish, conduct, operate or maintain an institution in this state
- 8 without a license as required by this chapter, except for persons issued
- 9 a license by the Commissioner of Children and Families pursuant to
- section 17a-145 for the operation of (1) a substance abuse treatment
- 11 facility, or (2) a facility for the purpose of caring for women during

12 pregnancies and for women and their infants following such 13 pregnancies. Application for such license shall (A) be made to the 14 Department of Public Health upon forms provided by it, [and shall] (B) 15 be accompanied by the fee required under subsection (c), (d) or (e) of 16 this section, and (C) contain such information as the department 17 requires, which may include affirmative evidence of ability to comply 18 with reasonable standards and regulations prescribed under the 19 provisions of this chapter. The commissioner may require as a 20 condition of licensure that an applicant sign a consent order providing 21 reasonable assurances of compliance with the Public Health Code. The 22 commissioner may issue more than one chronic disease hospital 23 license to a single institution until such time as the state offers a 24 rehabilitation hospital license.

- Sec. 2. Section 19a-490 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- 27 As used in this chapter and sections 17b-261e, 38a-498b and 38a-28 525b:
- 29 (a) "Institution" means a hospital, short-term hospital special 30 hospice, hospice inpatient facility, residential care home, health care 31 facility for the handicapped, nursing home facility, home health care 32 agency, homemaker-home health aide agency, behavioral health 33 facility, assisted living services agency, substance abuse treatment 34 facility, outpatient surgical facility, outpatient clinic, an infirmary 35 operated by an educational institution for the care of students enrolled 36 in, and faculty and employees of, such institution; a facility engaged in 37 providing services for the prevention, diagnosis, treatment or care of 38 human health conditions, including facilities operated and maintained 39 by any state agency, except facilities for the care or treatment of 40 mentally ill persons or persons with substance abuse problems; and a 41 residential facility for persons with intellectual disability licensed 42 pursuant to section 17a-227 and certified to participate in the Title XIX 43 Medicaid program as an intermediate care facility for individuals with 44 intellectual disability;

(b) "Hospital" means an establishment for the lodging, care and treatment of persons suffering from disease or other abnormal physical or mental conditions and includes inpatient psychiatric services in general hospitals;

- (c) "Residential care home" or "rest home" means a community residence that furnishes, in single or multiple facilities, food and shelter to two or more persons unrelated to the proprietor and, in addition, provides services that meet a need beyond the basic provisions of food, shelter and laundry and may qualify as a setting that allows residents to receive home and community-based services funded by state and federal programs;
- (d) "Home health care agency" means a public or private organization, or a subdivision thereof, engaged in providing professional nursing services and the following services, available twenty-four hours per day, in the patient's home or a substantially equivalent environment: Homemaker-home health aide services as defined in this section, physical therapy, speech therapy, occupational therapy or medical social services. The agency shall provide professional nursing services and at least one additional service directly and all others directly or through contract. An agency shall be available to enroll new patients seven days a week, twenty-four hours per day;
- (e) "Homemaker-home health aide agency" means a public or private organization, except a home health care agency, which provides in the patient's home or a substantially equivalent environment supportive services which may include, but are not limited to, assistance with personal hygiene, dressing, feeding and incidental household tasks essential to achieving adequate household and family management. Such supportive services shall be provided under the supervision of a registered nurse and, if such nurse determines appropriate, shall be provided by a social worker, physical therapist, speech therapist or occupational therapist. Such supervision may be provided directly or through contract;

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(f) "Homemaker-home health aide services" as defined in this section shall not include services provided to assist individuals with activities of daily living when such individuals have a disease or condition that is chronic and stable as determined by a physician licensed in the state of Connecticut;

- (g) "Behavioral health facility" means any facility that provides mental health services to persons eighteen years of age or older or substance use disorder services to persons of any age in an outpatient treatment or residential setting to ameliorate mental, emotional, behavioral or substance use disorder issues;
- 88 (h) "Alcohol or drug treatment facility" means any facility for the 89 care or treatment of persons suffering from alcoholism or other drug 90 addiction;
- 91 (i) "Person" means any individual, firm, partnership, corporation, 92 limited liability company or association;
- 93 (j) "Commissioner" means the Commissioner of Public Health or the 94 commissioner's designee;
- 95 (k) "Home health agency" means an agency licensed as a home health care agency or a homemaker-home health aide agency;
- 97 (l) "Assisted living services agency" means an agency that provides, 98 among other things, nursing services and assistance with activities of 99 daily living to a population that is chronic and stable;
 - (m) "Outpatient clinic" means an organization operated by a municipality or a corporation, other than a hospital, that provides (1) ambulatory medical care, including preventive and health promotion services, (2) dental care, or (3) mental health services in conjunction with medical or dental care for the purpose of diagnosing or treating a health condition that does not require the patient's overnight care;
- 106 (n) "Multicare institution" means a hospital, psychiatric outpatient 107 clinic for adults, free-standing facility for the care or treatment of

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substance abusive or dependent persons, hospital for psychiatric disabilities, as defined in section 17a-495, or a general acute care hospital that provides outpatient behavioral health services that (1) is licensed in accordance with this chapter, (2) has more than one facility or one or more satellite units owned and operated by a single licensee, and (3) offers complex patient health care services at each facility or satellite unit; [and]

- (o) "Nursing home" or "nursing home facility" means (1) any chronic and convalescent nursing home or any rest home with nursing supervision that provides nursing supervision under a medical director twenty-four hours per day, or (2) any chronic and convalescent nursing home that provides skilled nursing care under medical supervision and direction to carry out nonsurgical treatment and dietary procedures for chronic diseases, convalescent stages, acute diseases or injuries; [.] and
- 123 (p) "Outpatient dialysis unit" means (1) an out-of-hospital out-124 patient dialysis unit that is licensed by the department to provide (A) services on an out-patient basis to persons requiring dialysis on a 125 126 short-term basis or for a chronic condition, or (B) training for home 127 dialysis, or (2) an in-hospital dialysis unit that is a special unit of a licensed hospital designed, equipped and staffed to (A) offer dialysis 128 129 therapy on an out-patient basis, (B) provide training for home dialysis, 130 and (C) perform renal transplantations.
- Sec. 3. Subsection (a) of section 20-126*l* of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- 134 (a) As used in this section:

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135 (1) "General supervision of a licensed dentist" means supervision 136 that authorizes dental hygiene procedures to be performed with the 137 knowledge of said licensed dentist, whether or not the dentist is on the 138 premises when such procedures are being performed;

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(2) "Public health facility" means an institution, as defined in section 140 19a-490, <u>as amended by this act</u>, a community health center, a group 141 home, a school, a preschool operated by a local or regional board of 142 education or a head start program or a program offered or sponsored 143 by the federal Special Supplemental Food Program for Women, Infants 144 and Children; [and]

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- (3) The "practice of dental hygiene" means the performance of educational, preventive and therapeutic services including: Complete prophylaxis; the removal of calcerous deposits, accretions and stains from the supragingival and subgingival surfaces of the teeth by scaling, root planing and polishing; the application of pit and fissure sealants and topical solutions to exposed portions of the teeth; dental hygiene examinations and the charting of oral conditions; dental hygiene assessment, treatment planning and evaluation; the administration of local anesthesia in accordance with the provisions of subsection (d) of this section; and collaboration in the implementation of the oral health care regimen; [.] and
- (4) "Contact hour" means a minimum of fifty minutes of continuing
 education activity.
- Sec. 4. Subsection (g) of section 20-126*l* of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- 161 (g) Each licensed dental hygienist applying for license renewal shall 162 earn a minimum of sixteen contact hours of continuing education 163 within the preceding twenty-four-month period, including, for 164 registration periods beginning on and after October 1, 2016, at least 165 one contact hour of training or education in infection control in a 166 dental setting and, for registration periods beginning on and after 167 October 1, 2017, at least one contact hour of training or education in 168 cultural competency. The subject matter for continuing education shall 169 reflect the professional needs of the licensee in order to meet the health 170 care needs of the public. Continuing education activities shall provide

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171 significant theoretical or practical content directly related to clinical or 172 scientific aspects of dental hygiene. Qualifying continuing education 173 activities include, but are not limited to, courses, including on-line 174 courses, that are offered or approved by dental schools and other 175 institutions of higher education that are accredited or recognized by 176 Council on Dental Accreditation, a regional accrediting 177 organization, the American Dental Association, a state, district or local 178 dental association or society affiliated with the American Dental 179 Association, the National Dental Association, the American Dental 180 Hygienists Association or a state, district or local dental hygiene 181 association or society affiliated with the American Dental Hygienists 182 Association, the Academy of General Dentistry, the Academy of 183 Dental Hygiene, the American Red Cross or the American Heart Association sponsoring programs in 184 when cardiopulmonary 185 resuscitation or cardiac life support, the United States Department of 186 Veterans Affairs and armed forces of the United States when 187 conducting programs at United States governmental facilities, a 188 hospital or other health care institution, agencies or businesses whose 189 programs are accredited or recognized by the Council on Dental 190 Accreditation, local, state or national medical associations, or a state or 191 local health department. Eight hours of volunteer dental practice at a 192 public health facility, as defined in subsection (a) of this section, may 193 be substituted for one contact hour of continuing education, up to a 194 maximum of five contact hours in one two-year period. Activities that 195 do not qualify toward meeting these requirements include professional 196 organizational business meetings, speeches delivered at luncheons or 197 banquets, and the reading of books, articles, or professional journals. 198 Not more than four contact hours of continuing education may be 199 earned through an on-line or other distance learning program.

- Sec. 5. Subsection (f) of section 10-206 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- 203 (f) On and after [February 1, 2004] October 1, 2017, each local or regional board of education shall report to the local health department

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and the Department of Public Health, on an [annual] triennial basis, the total number of pupils per school and per school district having a diagnosis of asthma (1) at the time of public school enrollment, (2) in grade six or seven, and (3) in grade ten or eleven. The report shall contain the asthma information collected as required under subsections (b) and (c) of this section and shall include pupil age, gender, race, ethnicity and school. Beginning on October 1, 2004, and every three years thereafter, the Department of Public Health shall review the asthma screening information reported pursuant to this section and shall submit a report to the joint standing committees of the General Assembly having cognizance of matters relating to public health and education concerning asthma trends and distributions among pupils enrolled in the public schools. The report shall be submitted in accordance with the provisions of section 11-4a and shall include, but not be limited to, trends and findings based on pupil age, gender, race, ethnicity, school and the education reference group, as determined by the Department of Education for the town or regional school district in which such school is located.

- Sec. 6. Section 19a-580d of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
 - (a) For purposes of this section, "do not resuscitate order" or "DNR order" means an order written by a physician licensed under chapter 370 or advanced practice registered nurse licensed under chapter 378 for a particular patient to withhold cardiopulmonary resuscitation of such patient, including chest compressions, defibrillation or breathing, or ventilation of such patient by any assistive or mechanical means, including, but not limited to, mouth-to-mouth, bag-valve mask, endotracheal tube or ventilator.
 - (b) The Department of Public Health shall adopt regulations, in accordance with chapter 54, to provide for a system governing the recognition and transfer of ["] do not resuscitate ["] or DNR orders between health care institutions licensed pursuant to chapter 368v and upon intervention by emergency medical services providers certified

238 or licensed pursuant to chapter 368d. The regulations shall include, but 239 not be limited to, procedures concerning the use of ["] do not 240 resuscitate ["] bracelets. The regulations shall specify that, upon 241 request of the patient or his or her authorized representative, the 242 physician or advanced practice registered nurse who issued the ["] do 243 not resuscitate ["] order shall assist the patient or his or her authorized 244 representative in utilizing the system. The regulations shall not limit 245 the authority of the Commissioner of Developmental Services under 246 subsection (g) of section 17a-238 concerning orders applied to persons 247 receiving services under the direction of the Commissioner of 248 Developmental Services.

- Sec. 7. Section 19a-17 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- (a) Each board or commission established under chapters 369 to 376, inclusive, 378 to 381, inclusive, and 383 to 388, inclusive, and the Department of Public Health with respect to professions under its jurisdiction that have no board or commission may take any of the following actions, singly or in combination, based on conduct that occurred prior or subsequent to the issuance of a permit or a license upon finding the existence of good cause:
- 258 (1) Revoke a practitioner's license or permit;
- 259 (2) Suspend a practitioner's license or permit;
- 260 (3) Censure a practitioner or permittee;
- 261 (4) Issue a letter of reprimand to a practitioner or permittee;
- 262 (5) Place a practitioner or permittee on probationary status and 263 require the practitioner or permittee to:
- 264 (A) Report regularly to such board, commission or department 265 upon the matters which are the basis of probation;
- 266 (B) Limit practice to those areas prescribed by such board,

- 267 commission or department;
- (C) Continue or renew professional education until a satisfactory degree of skill has been attained in those areas which are the basis for the probation;
- 271 (6) Assess a civil penalty of up to twenty-five thousand dollars;
- 272 (7) In those cases involving persons or entities licensed or certified 273 pursuant to sections 20-341d, 20-435, 20-436, 20-437, 20-438, 20-475 and 274 20-476, <u>as amended by this act</u>, require that restitution be made to an 275 injured property owner; or
- 276 (8) Summarily take any action specified in this subsection against a 277 practitioner's license or permit upon receipt of proof that such 278 practitioner has been:
 - (A) Found guilty or convicted as a result of an act which constitutes a felony under (i) the laws of this state, (ii) federal law, or (iii) the laws of another jurisdiction and which, if committed within this state, would have constituted a felony under the laws of this state; or
 - (B) Subject to disciplinary action similar to that specified in this subsection by a duly authorized professional agency of any state, the federal government, the District of Columbia, a United States possession or territory or a foreign jurisdiction. The applicable board or commission, or the department shall promptly notify the practitioner or permittee that his license or permit has been summarily acted upon pursuant to this subsection and shall institute formal proceedings for revocation within ninety days after such notification.
 - (b) Such board or commission or the department may withdraw the probation if it finds that the circumstances that required action have been remedied.
- (c) Such board or commission or the department where appropriate may summarily suspend a practitioner's license or permit in advance of a final adjudication or during the appeals process if such board or

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commission or the department finds that a practitioner or permittee represents a clear and immediate danger to the public health and safety if he is allowed to continue to practice.

- (d) In addition to the authority provided to the Department of Public Health in subsection (a) of this section, the department may resolve any disciplinary action with respect to a practitioner's license or permit in any profession by voluntary surrender or agreement not to renew or reinstate.
- (e) Such board or commission or the department may reinstate a license that has been suspended or revoked if, after a hearing, such board or commission or the department is satisfied that the practitioner or permittee is able to practice with reasonable skill and safety to patients, customers or the public in general. As a condition of reinstatement, the board or commission or the department may impose disciplinary or corrective measures authorized under this section.
- (f) Such board or commission or the department may take disciplinary action against a practitioner's license or permit as a result of the practitioner having been subject to disciplinary action similar to an action specified in subsection (a) of this section by a duly authorized professional disciplinary agency of any state, [a federal governmental agency] the federal government, the District of Columbia, a United States possession or territory or a foreign jurisdiction. Such board or commission or the department may rely upon the findings and conclusions made by a duly authorized professional disciplinary agency of any state, [a federal governmental agency] the federal government, the District of Columbia, a United States possession or territory or foreign jurisdiction in taking such disciplinary action.
- (g) As used in this section, the term "license" shall be deemed to include the following authorizations relative to the practice of any profession listed in subsection (a) of this section: (1) Licensure by the Department of Public Health; (2) certification by the Department of

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- 329 Public Health; and (3) certification by a national certification body.
- 330 (h) As used in this chapter, the term "permit" includes any 331 authorization issued by the department to allow the practice, limited 332 or otherwise, of a profession which would otherwise require a license; 333 and the term "permittee" means any person who practices pursuant to 334 a permit.
- Sec. 8. Section 20-74a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- 337 As used in this chapter:

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(1) "Occupational therapy" means the evaluation, planning and implementation of a program of purposeful activities to develop or maintain adaptive skills necessary to achieve the maximal physical and mental functioning of the individual in his daily pursuits. The practice of "occupational therapy" includes, but is not limited to, evaluation and treatment of individuals whose abilities to cope with the tasks of living are threatened or impaired by developmental [deficits] disabilities, the aging process, learning disabilities, poverty and cultural differences, physical injury or disease, psychological and social disabilities, or anticipated [disfunction] dysfunction, using (A) such treatment techniques as task-oriented activities to prevent or correct physical or emotional [deficits] disabilities or to minimize the disabling effect of these [deficits] disabilities in the life of the individual, (B) such evaluation techniques as assessment of sensory motor abilities, assessment of the development of self-care activities and capacity for independence, assessment of the physical capacity for prevocational and work tasks, assessment of play and leisure performance, and appraisal of living areas for [the handicapped] persons with disabilities, (C) specific occupational therapy techniques such as activities of daily living skills, the fabrication and application of splinting devices, sensory motor activities, the use of specifically designed manual and creative activities, guidance in the selection and use of adaptive equipment, specific exercises to enhance functional

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361 performance and treatment techniques for physical capabilities for

- 362 work activities. Such techniques are applied in the treatment of
- individual patients or clients, in groups or through social systems.
- Occupational therapy also includes the establishment and modification
- of peer review.
- 366 (2) "Occupational therapist" means a person licensed to practice 367 occupational therapy as defined in this chapter and whose license is in
- 368 good standing.
- 369 (3) "Occupational therapy assistant" means a person licensed to
- assist in the practice of occupational therapy, under the supervision of
- 371 or with the consultation of a licensed occupational therapist, and
- 372 whose license is in good standing.
- 373 (4) "Commissioner" means the Commissioner of Public Health, or
- 374 <u>the commissioner's designee</u>.
- 375 (5) "Department" means the Department of Public Health.
- 376 (6) "Supervision" means the overseeing of or participation in the
- 377 work of an occupational therapist assistant by a licensed occupational
- 378 therapist, including, but not limited to: (A) Continuous availability of
- 379 <u>direct communication between the occupational therapist assistant and</u>
- 380 the licensed occupational therapist; (B) availability of the licensed
- occupational therapist on a regularly scheduled basis to (i) review the
- practice of the occupational therapist assistant, and (ii) support the
- occupational therapist assistant in the performance of the occupational
- 384 <u>therapist assistant's services; and (C) a predetermined plan for</u>
- 385 <u>emergency situations, including the designation of an alternate</u>
- 386 <u>licensed occupational therapist to oversee or participate in the work of</u> 387 the occupational therapist assistant in the absence of the regular
- 388 licensed occupational therapist.
- Sec. 9. Subsection (a) of section 20-195 of the general statutes is
- 390 repealed and the following is substituted in lieu thereof (Effective
- 391 *October 1, 2017*):

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(a) Nothing in this chapter shall be construed to limit the activities and services of a graduate student, intern or resident in psychology, pursuing a course of study in an educational institution under the provisions of section 20-189, if such activities constitute a part of a supervised course of study. No license as a psychologist shall be required of a person holding a doctoral degree based on a program of studies whose content was primarily psychological from an educational institution approved under the provisions of section 20-189, provided (1) such activities and services are necessary to satisfy the work experience as required by section 20-188, and (2) the exemption from the licensure requirement shall cease upon notification that the person did not successfully complete the licensing examination, as required under section 20-188, or one year after completion of such work experience, whichever occurs first. The provisions of this chapter shall not apply to any person in the salaried employ of any person, firm, corporation, educational institution or governmental agency when acting within the person's own organization. Nothing in this chapter shall be construed to prevent the giving of accurate information concerning education and experience by any person in any application for employment. Nothing in this chapter shall be construed to prevent physicians, optometrists, chiropractors, members of the clergy, attorneys-at-law or social workers from doing work of a psychological nature consistent with accepted standards in their respective professions.

Sec. 10. Subsection (c) of section 20-195bb of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):

(c) No license as a professional counselor shall be required of the following: (1) A person who furnishes uncompensated assistance in an emergency; (2) a clergyman, priest, minister, rabbi or practitioner of any religious denomination accredited by the religious body to which the person belongs and settled in the work of the ministry, provided the activities that would otherwise require a license as a professional counselor are within the scope of ministerial duties; (3) a sexual assault

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counselor, as defined in section 52-146k; (4) a person participating in uncompensated group or individual counseling; (5) a person with a master's degree in a health-related or human services-related field employed by a hospital, as defined in subsection (b) of section 19a-490, as amended by this act, performing services in accordance with section 20-195aa under the supervision of a person licensed by the state in one of the professions identified in subparagraphs (A) to (F), inclusive, of subdivision (2) of subsection (a) of section 20-195dd; (6) a person licensed or certified by any agency of this state and performing services within the scope of practice for which licensed or certified; (7) a student, intern or trainee pursuing a course of study in counseling in a regionally accredited institution of higher education, provided the activities that would otherwise require a license as a professional counselor are performed under supervision and constitute a part of a supervised course of study; (8) a person employed by an institution of higher education to provide academic counseling in conjunction with the institution's programs and services; [or] (9) a vocational rehabilitation counselor, job counselor, credit counselor, consumer counselor or any other counselor or psychoanalyst who does not purport to be a counselor whose primary service is the application of established principles of psycho-social development and behavioral science to the evaluation, assessment, analysis and treatment of emotional, behavioral or interpersonal dysfunction or difficulties that interfere with mental health and human development; or (10) a person who earned a degree in accordance with the requirements of subdivision (2) of subsection (a) of section 20-195dd, provided (A) the activities performed and services provided by such person constitute part of the supervised experience required for licensure under subdivision (3) of subsection (a) of said section, and (B) the exemption to the licensure requirement shall cease upon notification that the person did not successfully complete the licensing examination, as required under subdivision (4) of subsection (a) of said section, or one year after completion of such supervised experience, whichever occurs first.

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Sec. 11. Subsection (a) of section 20-195f of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):

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- (a) No license as a marital and family therapist shall be required of: (1) A student pursuing a course of study in an educational institution meeting the requirements of section 20-195c if such activities constitute a part of his supervised course of study; (2) a faculty member within an institution of higher learning performing duties consistent with his position; (3) a person holding a graduate degree in marriage and family therapy; [or a certificate of completion of a postdegree program for marriage and family therapy education, provided such activities and services constitute a part of his supervised work experience required for licensure] provided (A) the activities performed or services provided by the person constitute part of the supervised work experience required for licensure under subdivision (3) of subsection (a) of section 20-195c, and (B) the exemption to the licensure requirement shall cease for a person who has completed the work experience required for licensure and received notification that he or she did not successfully complete the licensing examination, as required under subdivision (4) of subsection (a) of said section, one year after completion of such work experience; or (4) a person licensed or certified in this state in a field other than marital and family therapy practicing within the scope of such license or certification.
- Sec. 12. Section 19a-52 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):

Notwithstanding any other provision of the general statutes, the Department of Public Health and the department's contractors, in carrying out its powers and duties under section 19a-50, may, within [the limits of appropriations, purchase wheelchairs and placement equipment directly and without the issuance of a purchase order, provided such purchases shall not be in excess of six thousand five hundred dollars per unit purchased. All such purchases shall be made in the open market, but shall, when possible, be based on at least three

493 competitive bids. Such bids shall be solicited by sending notice to 494 prospective suppliers and by posting notice on a public bulletin board 495 within said Department of Public Health. Each bid shall be opened 496 publicly at the time stated in the notice soliciting such bid. Acceptance 497 of a bid by said Department of Public Health shall be based on 498 standard specifications as may be adopted by said department] 499 available appropriations, purchase medically necessary and appropriate durable medical equipment and other goods and services 500 501 approved by the department. Such goods and services shall be 502 identical to the goods and services that are covered under the state 503 Medicaid and HUSKY health programs administered by the 504 Department of Social Services. The payment for such goods and 505 services shall not exceed the state Medicaid rate for the same goods 506 and services.

- Sec. 13. Section 19a-53 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- 509 (a) [Each person licensed to practice medicine, surgery, midwifery, 510 chiropractic, naturopathy, podiatry or nursing or to use any other 511 means or agencies to treat, prescribe for, heal or otherwise alleviate 512 deformity, ailment, disease or any other form of human ills, who has 513 professional knowledge that any child under five years of age has any 514 physical defect shall, within forty-eight hours from the time of 515 acquiring such knowledge, mail to the Department of Public Health a 516 report, stating the name and address of the child, the name and 517 address of the child's parents or guardians, As used in this section:
- 518 (1) "Commissioner" means the Commissioner of Public Health, or 519 the commissioner's designee;
- 520 (2) "Department" means the Department of Public Health;
- 521 (3) "Licensed health care professional" means a physician licensed 522 pursuant to chapter 370, a physician assistant licensed pursuant to 523 chapter 370, an advanced practice registered nurse or a registered 524 nurse licensed pursuant to chapter 378 or a nurse midwife licensed

- 525 pursuant to chapter 377; and
- 526 (4) "Newborn screening system" means the department's tracking 527 system for the screening of newborns pursuant to section 19a-55, as
- 528 <u>amended by this act.</u>

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- 529 (b) The department may, within available appropriations, establish 530 a birth defects surveillance program. Such program shall monitor the 531 frequency, distribution and types of birth defects occurring in the state.
- 532 (c) Each child that is born in the state shall have a birth defects
 533 screening completed by a licensed health care professional prior to
 534 discharge from the hospital. The administrative officer or other person
 535 in charge of each hospital shall enter the results of each birth defects
 536 screening into the birth defects registry located in the department's
 537 newborn screening system in a form and manner prescribed by the
 538 commissioner.
 - (d) Any licensed health care professional who provides care or treatment to a child that is under the age of one and was born in the state and who observes or acquires knowledge that the child has a birth defect shall, not later than forty-eight hours after observing or acquiring knowledge of such defect, notify the department of such defect in a form and manner prescribed by the commissioner. Such notification shall contain information, including, but not limited to, the nature of the [physical] birth defect and such other information as may reasonably be required by the department. The department shall [prepare and furnish suitable blanks in duplicate for such reports, shall] post the notification form on the department's Internet web site and keep each [report] notification made under this section on file for at least six years from the date of its receipt. [thereof and shall furnish a copy thereof to the State Board of Education within ten days.]
 - (e) The commissioner shall have access to identifying information in the hospital discharge records of newborn infants born in the state upon request. Such identifying information shall be used solely for purposes of the birth defects surveillance program. A hospital, as

defined in section 19a-490, as amended by this act, shall make available 557

- 558 to the department upon request the medical records of a patient
- diagnosed with a birth defect or other adverse reproductive outcomes 559
- for purposes of research and verification of data. 560
- 561 (f) The commissioner shall use the information collected under this
- 562 section and information available from other sources to conduct
- 563 routine analyses to determine whether there were any preventable
- causes of the birth defects about which the department was notified 564
- under this section. 565
- 566 (g) All information, including, but not limited to, personally
- identifiable information collected from a health care professional or 567
- 568 hospital under this section shall be confidential. Such personally
- 569 identifiable information shall be used solely for purposes of the birth
- 570 defects surveillance program. Access to such information shall be
- limited to the department and persons with a valid scientific interest 571
- 572 and qualification as determined by the commissioner, provided the
- 573 department and such persons are engaged in demographic,
- 574 epidemiologic or other similar studies related to health and agree, in
- writing, to maintain the confidentiality of such information as 575
- 576 prescribed in this section and section 19a-25.
- 577 (h) The commissioner shall maintain an accurate record of all
- 578 persons who are given access to the information in the newborn
- screening system. The record shall include (1) the name, title and 579
- 580 organizational affiliation of persons given access to the system, (2)
- dates of access, and (3) the specific purpose for which the information 581
- 582 is used. The record shall be open to public inspection during the
- 583 department's normal operating hours.
- 584 (i) All research proposed to be conducted using personally
- 585 identifiable information in the newborn screening system or requiring
- 586 contact with affected individuals shall be reviewed and approved in
- 587 advance by the commissioner.
- 588 (i) The commissioner may publish statistical compilations relating to

589 birth defects or other adverse reproductive outcomes that do not in 590 any way identify individual cases or individual sources of information.

- 591 Sec. 14. Subsection (b) of section 19a-55 of the general statutes is 592 repealed and the following is substituted in lieu thereof (Effective 593 October 1, 2017):
- 594 (b) In addition to the testing requirements prescribed in subsection 595 (a) of this section, the administrative officer or other person in charge 596 of each institution caring for newborn infants shall cause to have 597 administered to (1) every such infant in its care a screening test for (A) 598 cystic fibrosis, and (B) critical congenital heart disease, and (2) any 599 newborn infant who fails a newborn hearing screening, as described in 600 section 19a-59, a screening test for cytomegalovirus, provided such 601 screening test shall be administered within available appropriations on 602 and after January 1, 2016. On and after January 1, 2018, the administrative officer or other person in charge of each institution 603 604 caring for newborn infants who performs the testing for critical 605 congenital heart disease shall enter the results of such test into the 606 newborn screening system pursuant to section 19a-53, as amended by 607 this act. Such screening tests shall be administered as soon after birth 608 as is medically appropriate.
- 609 Sec. 15. Section 19a-37 of the general statutes is repealed and the 610 following is substituted in lieu thereof (*Effective October 1, 2017*):
- 611 (a) As used in this section:
- 612 (1) "Laboratory or firm" means an environmental laboratory
- 613 registered by the Department of Public Health pursuant to section 19a-
- 614 29a;
- 615 (2) "Private well" means a water supply well that meets all of the
- following criteria: (A) Is not a public well; (B) supplies a population of 616
- 617 less than twenty-five persons per day; and (C) is owned or controlled
- 618 through an easement or by the same entity that owns or controls the
- 619 building or parcel that is served by the water supply;

(3) "Public well" means a water supply well that supplies a public
 water system;

- 622 (4) "Well for semipublic use" means a water supply well that (A)
 623 does not meet the definition of a private well or public well, and (B)
 624 provides water for drinking and other domestic purposes; and
- 625 (5) "Water supply well" means an artificial excavation constructed 626 by any method for the purpose of getting water for drinking or other 627 domestic use.

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- [(a)] (b) The Commissioner of Public Health may adopt regulations in the Public Health Code for the preservation of the public health pertaining to (1) protection and location of new water supply wells or springs for residential construction or for public or semipublic use, and (2) inspection for compliance with the provisions of municipal regulations adopted pursuant to section 22a-354p.
 - [(b)] (c) The Commissioner of Public Health shall adopt regulations, in accordance with chapter 54, for the testing of water quality in private residential wells and wells for semipublic use. Any laboratory or firm which conducts a water quality test on a private well serving a residential property or well for semipublic use shall, not later than thirty days after the completion of such test, report the results of such test to (1) the public health authority of the municipality where the property is located, and (2) the Department of Public Health in a format specified by the department, provided such report shall [not] only be required if the party for whom the laboratory or firm conducted such test informs the laboratory or firm identified on the chain of custody documentation submitted with the test samples that the test was [not conducted within six months of] conducted in <u>connection with</u> the sale of such property. No regulation may require such a test to be conducted as a consequence or a condition of the sale, exchange, transfer, purchase or rental of the real property on which the private residential well or well for semipublic use is located. [For purposes of this section, "laboratory or firm" means an environmental

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laboratory registered by the Department of Public Health pursuant to section 19a-29a.]

[(c)] (d) Prior to the sale, exchange, purchase, transfer or rental of real property on which a residential well is located, the owner shall provide the buyer or tenant notice that educational material concerning private well testing is available on the Department of Public Health web site. Failure to provide such notice shall not invalidate any sale, exchange, purchase, transfer or rental of real property. If the seller or landlord provides such notice in writing, the seller or landlord and any real estate licensee shall be deemed to have fully satisfied any duty to notify the buyer or tenant that the subject real property is located in an area for which there are reasonable grounds for testing under subsection [(f)] (g) or [(i)] (j) of this section.

[(d)] (e) The Commissioner of Public Health shall adopt regulations, in accordance with chapter 54, to clarify the criteria under which the commissioner may issue a well permit exception and to describe the terms and conditions that shall be imposed when a well is allowed at a premises (1) that is connected to a public water supply system, or (2) whose boundary is located within two hundred feet of an approved community water supply system, measured along a street, alley or easement. Such regulations shall (A) provide for notification of the permit to the public water supplier, (B) address the quality of the water supplied from the well, the means and extent to which the well shall not be interconnected with the public water supply, the need for a physical separation, and the installation of a reduced pressure device for backflow prevention, the inspection and testing requirements of any such reduced pressure device, and (C) identify the extent and frequency of water quality testing required for the well supply.

[(e)] (f) No regulation may require that a certificate of occupancy for a dwelling unit on such residential property be withheld or revoked on the basis of a water quality test performed on a private residential well pursuant to this section, unless such test results indicate that any maximum contaminant level applicable to public water supply

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systems for any contaminant listed in the public health code has been 686 exceeded. No administrative agency, health district or municipal 687 health officer may withhold or cause to be withheld such a certificate of occupancy except as provided in this section.

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[(f)] (g) The local director of health may require a private residential well or well for semipublic use to be tested for arsenic, radium, uranium, radon or gross alpha emitters, when there are reasonable grounds to suspect that such contaminants are present in the groundwater. For purposes of this subsection, "reasonable grounds" means (1) the existence of a geological area known to have naturally occurring arsenic, radium, uranium, radon or gross alpha emitter deposits in the bedrock; or (2) the well is located in an area in which it is known that arsenic, radium, uranium, radon or gross alpha emitters are present in the groundwater.

[(g)] (h) Except as provided in subsection [(h)] (i) of this section, the collection of samples for determining the water quality of private residential wells and wells for semipublic use may be made only by (1) employees of a laboratory or firm certified or approved by the Department of Public Health to test drinking water, if such employees have been trained in sample collection techniques, (2) certified water operators, (3) local health departments and state employees trained in sample collection techniques, or (4) individuals with training and experience that the Department of Public Health deems sufficient.

[(h)] (i) Any owner of a residential construction, including, but not limited to, a homeowner, on which a private residential well is located or any general contractor of a new residential construction on which a private residential well is located may collect samples of well water for submission to a laboratory or firm for the purposes of testing water quality pursuant to this section, provided (1) such laboratory or firm has provided instructions to said owner or general contractor on how to collect such samples, and (2) such owner or general contractor is identified to the subsequent owner on a form to be prescribed by the Department of Public Health. No regulation may prohibit or impede

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718 such collection or analysis.

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- 719 [(i)] (j) The local director of health may require private residential 720 wells and wells for semipublic use to be tested for pesticides, 721 herbicides or organic chemicals when there are reasonable grounds to 722 suspect that any such contaminants might be present in the 723 groundwater. For purposes of this subsection, "reasonable grounds" 724 means (1) the presence of nitrate-nitrogen in the groundwater at a 725 concentration greater than ten milligrams per liter, or (2) that the 726 private residential well or well for semipublic use is located on land, or 727 in proximity to land, associated with the past or present production, 728 storage, use or disposal of organic chemicals as identified in any public 729 record.
- 730 (k) Any water transported in bulk by any means to a premises 731 currently supplied by a private well or well for semipublic use where 732 the water is to be used for purposes of drinking or domestic use shall 733 be provided by a bulk water hauler licensed pursuant to section 20-734 278h. No bulk water hauler shall deliver water without first notifying 735 the owner of the premises of such delivery. Bulk water hauling to a 736 premises currently supplied by a private well or well for semipublic 737 use shall be permitted only as a temporary measure to alleviate a water 738 supply shortage.
- Sec. 16. Subsection (a) of section 19a-320 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July* 1, 2017):
 - (a) Any resident of this state, or any corporation formed under the law of this state, may erect, maintain and conduct a crematory in this state and provide the necessary appliances and facilities for the disposal by incineration of the bodies of the dead, in accordance with the provisions of this section. The location of such crematory shall be within the confines of an established cemetery containing not less than twenty acres, which cemetery shall have been in existence and operation for at least five years immediately preceding the time of the

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750 erection of such crematory, or shall be within the confines of a plot of 751 land approved for the location of a crematory by the selectmen of any 752 town, the mayor and council or board of aldermen of any city and the 753 warden and burgesses of any borough; provided, in any town, city or 754 borough having a zoning commission, such commission shall have the 755 authority to grant such approval. [This section shall not apply to any 756 resident of this state or any corporation formed under the law of this 757 state that was issued an air quality permit by the Department of 758 Energy and Environmental Protection prior to October 1, 1998.] On 759 and after July 1, 2017, no new crematory shall be located within five 760 hundred feet of any residential structure or land for residential 761 purposes not owned by the owner of the crematory.

- Sec. 17. Subdivision (1) of subsection (c) of section 19a-127*l* of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- (c) (1) There is established a Quality of Care Advisory Committee which shall advise the Department of Public Health on the issues set forth in subdivisions (1) to (12), inclusive, of subsection (b) of this section. The advisory committee [shall] may meet at [least semiannually] the discretion of the Commissioner of Public Health.
- Sec. 18. Section 19a-131g of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- 772 The Commissioner of Public Health shall establish a Public Health 773 Preparedness Advisory Committee for purposes of advising the 774 Department of Public Health on matters concerning emergency 775 responses to a public health emergency. The advisory committee shall 776 consist of the Commissioner of Public Health, the Commissioner of 777 Emergency Services and Public Protection, the president pro tempore 778 of the Senate, the speaker of the House of Representatives, the majority 779 and minority leaders of both houses of the General Assembly and the 780 chairpersons and ranking members of the joint standing committees of 781 the General Assembly having cognizance of matters relating to public

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782 health, public safety and the judiciary, and representatives of town, 783 city, borough and district directors of health, as appointed by the 784 commissioner, and any other organization or persons that the 785 commissioner deems relevant to the issues of public health 786 preparedness. [The] Upon the request of the commissioner, the Public 787 Health Preparedness Advisory Committee [shall develop] may meet to 788 review the plan for emergency responses to a public health emergency 789 [. Such plan may include an emergency notification service. Not later 790 than January 1, 2004, and annually thereafter, the committee shall 791 submit a report, in accordance with section 11-4a, to the Governor and 792 the joint standing committees of the General Assembly having 793 cognizance of matters relating to public health and public safety, on the status of a public health emergency plan and the resources needed 794 795 for implementation of such plan and other matters as deemed 796 necessary by the commissioner.

- Sec. 19. Subsection (f) of section 19a-491c of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- (f) (1) Except as provided in subdivision (2) of this subsection, a long-term care facility shall not employ, enter into a contract with or allow to volunteer any individual required to submit to a background search until the long-term care facility receives notice from the Department of Public Health pursuant to subdivision (4) of subsection (d) of this section.
 - (2) A long-term care facility may employ, enter into a contract with or allow to volunteer an individual required to submit to a background search on a conditional basis before the long-term care facility receives notice from the department that such individual does not have a disqualifying offense, provided: (A) The employment or contractual or volunteer period on a conditional basis shall last not more than sixty days, except the sixty-day time period may be extended by the department to allow for the filing and consideration of written request for a waiver of a disqualifying offense filed by an individual pursuant

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to subsection (d) of this section, (B) the long-term care facility has 815 816 begun the review required under subsection (c) of this section and the 817 individual has submitted to checks pursuant to subsection (c) of this section, (C) the individual is subject to direct, on-site supervision 818 819 during the course of such conditional employment or contractual or 820 volunteer period, and (D) the individual, in a signed statement (i) 821 affirms that the individual has not committed a disqualifying offense, 822 and (ii) acknowledges that a disqualifying offense reported in the 823 background search required by subsection (c) of this section shall 824 constitute good cause for termination and a long-term care facility may 825 terminate the individual if a disqualifying offense is reported in said 826 background search.

- Sec. 20. Section 19a-31a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- 829 (a) For purposes of this section: [, (1) a "biolevel-three laboratory" or "laboratory"]
- (1) "Microbiological and biomedical biosafety laboratory" means a laboratory that (A) utilizes any living agent capable of causing a human infection or reportable human disease, or (B) is used to secure evidence of the presence or absence of a living agent capable of causing a human infection or reportable human disease, for the purposes of teaching, research or quality control of the infection or disease;
- 838 (2) "Biolevel-two microbiological and biomedical biosafety
 839 laboratory" means a microbiological and biomedical biosafety
 840 laboratory that presents a moderate hazard to personnel of exposure to
 841 an infection or disease and utilizes agents that are associated with
 842 human infection or disease;
- 843 (3) "Biolevel-three microbiological and biomedical biosafety
 844 <u>laboratory</u>" means a <u>microbiological and biomedical biosafety</u>
 845 laboratory [which is] operated by an institution of higher education, or
 846 any other research entity, that (A) handles agents that (i) have a known

847 potential for aerosol transmission, (ii) may cause serious and

- 848 potentially lethal human infections or diseases, and (iii) are either
- 849 <u>indigenous or exotic in origin,</u> and (B) is designed and equipped under
- 850 guidelines issued by the National Institutes of Health and the National
- 851 Centers for Disease Control as a biolevel-three laboratory; [, and (2)
- 852 "biolevel-three agent"] and
- 853 (4) "Biolevel-three agent" means an agent classified as a biolevel-
- 854 three agent by the National Institutes of Health and the National
- 855 Centers for Disease Control.
- 856 (b) No biolevel-two microbiological and biomedical biosafety
- 857 <u>laboratory or biolevel-three microbiological and biomedical biosafety</u>
- 858 <u>laboratory shall operate unless such laboratory has registered with the</u>
- 859 Department of Public Health and paid the registration fee required
- 860 <u>under subsection (c) of this section.</u>
- 861 (c) The biennial registration fee for a biolevel-two microbiological
- 862 and biomedical biosafety laboratory and a biolevel-three
- 863 microbiological and biomedical biosafety laboratory shall be four
- 864 hundred dollars.
- 865 (d) Microbiological and biomedical biosafety laboratories that are
- 866 state or federally operated entities shall be exempt from the
- registration fee requirements set forth in subsection (c) of this section.
- [(b)] (e) If an institution [which] that operates a biolevel-three
- 869 <u>microbiological and biomedical biosafety</u> laboratory establishes a
- 870 biosafety committee pursuant to the National Institutes of Health or
- 871 the National Centers for Disease Control guidelines, such committee
- shall (1) forward the minutes of its meetings to the Department of
- Public Health and (2) meet at least annually with a representative of
- 874 the Department of Public Health to review safety procedures and
- discuss health issues relating to the operation of the laboratory.
- [(c)] (f) Each such institution shall report to the Department of
- Public Health any infection or injury relating to work at the laboratory

with biolevel-three agents and any incidents relating to such work which result in a recommendation by the institution that employees or members of the public be tested or monitored for potential health problems because of the possibility of infection or injury or incidents which pose a threat to public health.

- [(d)] (g) Each such institution shall report to the Department of Public Health any sanctions imposed on the laboratory or on the institution for incidents occurring at the laboratory by the National Institutes of Health, the National Centers for Disease Control, the United States Department of Defense or any other government agency.
- Sec. 21. Section 19a-59c of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
 - [(a)] The Department of Public Health is authorized to administer the federal Special Supplemental Food Program for Women, Infants and Children in the state, in accordance with federal law and regulations. The Commissioner of Public Health may adopt regulations, in accordance with the provisions of chapter 54, necessary to administer the program.
 - [(b) There is established a Women, Infants and Children Advisory Council consisting of the chairpersons of the joint standing committee of the General Assembly having cognizance of matters relating to public health; the Commissioner of Public Health or a designee; the executive director of the Commission on Women, Children and Seniors or a designee; a nutrition educator, appointed by the Governor; two local directors of the Women, Infants and Children program, one each appointed by the president pro tempore of the Senate and the speaker of the House of Representatives; two recipients of assistance under the Women, Infants and Children program, one each appointed by the majority leaders of the Senate and the House of Representatives; and two representatives of an anti-hunger organization, one each appointed by the minority leaders of the Senate and the House of Representatives. Council members shall serve for a term of two years.

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910 The chairperson and the vice-chairperson of the council shall be 911 elected by the full membership of the council. Vacancies shall be filled 912 by the appointing authority. The council shall meet at least twice a 913 year. Council members shall serve without compensation. The council

- 914 shall advise the Department of Public Health on issues pertaining to
- 915 increased participation and access to services under the federal Special
- 916 Supplemental Food Program for Women, Infants and Children.]
- 917 Sec. 22. Section 20-74s of the general statutes is amended by adding 918 subsection (z) as follows (*Effective from passage*):
- (NEW) (z) Nothing in this section shall be construed to prohibit or limit the ability of a licensed alcohol and drug counselor, who in the practice of alcohol and drug counseling, provides counseling services to an individual diagnosed with a co-occurring mental health condition other than alcohol and drug dependency, provided such counseling services are within the scope of practice of a licensed alcohol and drug counselor as described in this section.
- 926 Sec. 23. Section 35 of public act 15-242 is repealed and the following 927 is substituted in lieu thereof (*Effective from passage*):
- (a) There is established a task force to study rare diseases. The task force shall (1) examine research, diagnoses, treatment and education relating to rare diseases, and (2) make recommendations for the establishment of a permanent group of experts to advise the Department of Public Health on rare diseases. For purposes of this section, "rare disease" has the same meaning as provided in 21 USC 360bb, as amended from time to time.
 - (b) The task force shall consist of the following members:

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(1) Four appointed by the speaker of the House of Representatives, one of whom shall be a physician licensed and practicing in the state with experience researching, diagnosing or treating rare diseases and representing the specialty of neurology or neurological surgery, one of whom shall be a physician licensed and practicing in the state with

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experience researching, diagnosing or treating rare diseases and representing the specialty of pediatrics, one of whom shall be an administrator of a hospital in the state, and one of whom shall be a medical researcher with experience conducting research concerning rare diseases;

- (2) Four appointed by the president pro tempore of the Senate, one of whom shall be a physician licensed and practicing in the state with experience researching, diagnosing or treating rare diseases and representing the specialty of cardiology or cardiovascular surgery, one of whom shall be a physician licensed and practicing in the state with experience researching, diagnosing or treating rare diseases and representing the specialty of pulmonology, one of whom shall be a registered nurse or advanced practice registered nurse licensed and practicing in the state with experience treating rare diseases;
- (3) Two appointed by the majority leader of the House of Representatives, one of whom shall be a physician licensed and practicing in the state with experience researching, diagnosing or treating rare diseases and representing the specialty of orthopedics or orthopedic surgery, and one of whom shall be a rare disease survivor over the age of eighteen;
- (4) Two appointed by the majority leader of the Senate, one of whom shall be a physician licensed and practicing in the state with experience researching, diagnosing or treating rare diseases and representing the specialty of internal medicine, and one of whom shall be a caregiver of a pediatric rare disease survivor;
- (5) Two appointed by the minority leader of the House of Representatives, one of whom shall be a physician licensed and practicing in the state with experience researching, diagnosing or treating rare diseases and representing the specialty of emergency medicine, and one of whom shall be a representative of the National Organization for Rare Disorders; [and]

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(6) Two appointed by the minority leader of the Senate, one of whom shall be a representative of the biopharmaceutical industry in the state with experience in research and development relating to rare diseases, and one of whom shall be a representative of a hospital in the state with experience in research and development relating to rare diseases; [.] and

- 979 (7) The chairpersons of the General Assembly having cognizance of 980 matters relating to public health, or such chairpersons' designee.
- (c) Any member of the task force appointed under subdivision (1), (2), (3), (4), (5), [or] (6) or (7) of subsection (b) of this section may be a member of the General Assembly.
 - (d) All appointments to the task force shall be made not later than thirty days after the effective date of this section. Any vacancy shall be filled by the appointing authority.
 - (e) The speaker of the House of Representatives and the president pro tempore of the Senate shall select the chairpersons of the task force from among the members of the task force. Such chairpersons shall schedule the first meeting of the task force, which shall be held not later than sixty days after the effective date of this section.
 - (f) Not later than January 1, [2016] <u>2018</u>, the task force shall submit a report on its findings and recommendations to the joint standing committee of the General Assembly having cognizance of matters relating to public health, in accordance with the provisions of section 11-4a of the general statutes. The task force shall terminate on the date that it submits such report or January 1, [2016] <u>2018</u>, whichever is later.
 - Sec. 24. (NEW) (Effective October 1, 2017) Notwithstanding the provisions of sections 20-213, 20-217 and 20-227 of the general statutes, the Connecticut Board of Examiners of Embalmers and Funeral Directors and the Department of Public Health shall not take any disciplinary action pursuant to section 20-227 of the general statutes against a licensed embalmer or funeral director who received

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notification on or before October 1, 2017, that the licensee's score on the national board examination was invalidated as a result of the invalidation of such score if (1) the licensee retakes and successfully completes the prescribed examination not later than October 1, 2018, and (2) the licensee is subject to direct on-site supervision by another licensed embalmer or funeral director pending the licensee's successful completion of the prescribed examination. A record of such supervision shall be made available to the department upon request of the Commissioner of Public Health. Any affected licensee who fails to successfully complete the examination on or before October 1, 2018, shall have his or her license to practice as an embalmer or funeral director annulled, subject to the provisions of section 4-182 of the general statutes.

- Sec. 25. Section 46a-28 of the general statutes, as amended by section 2 of substitute house bill 7237 of the current session, is repealed and the following is substituted in lieu thereof (*Effective from passage*):
 - (a) The Advisory Board for Persons Who are Deaf or Hard of Hearing shall consist of the following [fifteen] sixteen members appointed by the Governor: (1) The consultant appointed by the State Board of Education in accordance with section 10-316a, or the consultant's designee; (2) the president of the Connecticut Council of Organizations Serving the Deaf, or the president's designee; (3) the president of the Connecticut Association of the Deaf, or the president's designee; (4) the president of the Connecticut Registry of Interpreters for the Deaf, or the president's designee; (5) the Commissioner of Rehabilitation Services, or the commissioner's designee; (6) the executive director of the American School for the Deaf, or the executive director's designee; (7) a parent of a student in a predominantly oral education program; (8) a parent of a student at the American School for the Deaf; (9) a person who is deaf; (10) a person who is hard of hearing; (11) a person who is deaf and blind; (12) an interpreting professional who serves deaf or hard of hearing persons; (13) a healthcare professional who works with persons who are deaf or hard of hearing; (14) the Governor's liaison to the disability community; [and]

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1038 (15) an educator who works with children who are deaf or hard of

- 1039 hearing; and (16) the director of the Connecticut Chapter of We the
- 1040 Deaf People. The Commissioner of Rehabilitation Services, the
- 1041 Governor's liaison to the disability community and a member chosen
- 1042 by the majority of the board shall be the chairpersons of the advisory
- 1043 board.
- 1044 (b) The advisory board shall meet at least quarterly or more often at
- 1045 the call of the chairpersons or a majority of the members. A majority of
- 1046 members in office but not less than [eight] nine voting members shall
- 1047 constitute a quorum.
- 1048 (c) Any appointed member who fails to attend three consecutive
- 1049 meetings or who fails to attend fifty per cent of all meetings held
- 1050 during any calendar year shall be deemed to have resigned. Vacancies
- 1051 occurring otherwise than by expiration of term in the membership of
- 1052 the advisory board shall be filled by the Governor.
- 1053 Sec. 26. Subsection (g) of section 2c-2h of the general statutes, as
- amended by section 4 of substitute house bill 7237 of the current 1054
- 1055 session, is repealed and the following is substituted in lieu thereof
- 1056 (*Effective from passage*):
- 1057 (g) Not later than July 1, 2020, and not later than every ten years
- 1058 thereafter, the joint standing committee of the General Assembly
- having cognizance of any of the following governmental entities or 1059
- 1060 programs shall conduct a review of the applicable entity or program in
- 1061 accordance with the provisions of section 2c-3:
- 1062 (1) Office of Long Term Care Ombudsman, established under
- 1063 section 17a-405;
- 1064 (2) Regulation of nursing home administrators pursuant to chapter
- 1065 368v;
- 1066 (3) Regulation of hearing aid dealers pursuant to chapter 398; [and]
- 1067 (4) Plumbing and Piping Work Board, established under section 20-

- 1068 331; and
- 1069 (5) Advisory Board for Persons Who are Deaf or Hard of Hearing, 1070 established under section 46a-27, as amended by this act.
- Sec. 27. Subsection (b) of section 46a-29 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from*
- 1073 *passage*):
- 1074 (b) The Commissioner of Education shall assign one vocational 1075 rehabilitation consultant to act as a liaison staff member of the 1076 [commission] <u>Advisory Board for Persons Who are Deaf or Hard of</u> 1077 Hearing.
- Sec. 28. Subsection (a) of section 19a-111i of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- (a) On or before [January 1, 2009] October 1, 2017, and annually 1081 1082 thereafter, the Commissioner of Public Health shall report, in 1083 accordance with section 11-4a, to the joint standing committees of the 1084 General Assembly having cognizance of matters relating to public 1085 health and human services on the status of lead poisoning prevention 1086 efforts in the state. Such report shall include, but not be limited to, (1) 1087 the number of children screened for lead poisoning during the 1088 preceding calendar year, (2) the number of children diagnosed with 1089 elevated blood levels during the preceding calendar year, and (3) the amount of testing, remediation, abatement and management of 1090 1091 materials containing toxic levels of lead in all premises during the 1092 preceding calendar year.
- Sec. 29. Subsection (a) of section 19a-6i of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
- 1096 (a) There is established a school-based health center advisory 1097 committee for the purpose of advising the Commissioner of Public

Health on matters relating to (1) statutory and regulatory changes to improve health care through access to school-based health centers and expanded school health sites, [and] (2) minimum standards for the provision of services in school-based health centers and expanded school health sites to ensure that high quality health care services are provided in school-based health centers and expanded school health sites, as such terms are defined in section 19a-6r, and (3) other topics of relevance to the school-based health centers and expanded school sites, as requested by the commissioner.

1107 Sec. 30. Subsection (g) of section 22a-430 of the general statutes is 1108 repealed and the following is substituted in lieu thereof (Effective July 1109 1, 2017):

(g) The commissioner shall, by regulation adopted prior to October 1, 1977, establish and define categories of discharges which constitute household and small commercial subsurface sewage disposal systems for which he shall delegate to the Commissioner of Public Health the authority to issue permits or approvals and to hold public hearings in accordance with this section, on and after said date. The Commissioner of Public Health shall, pursuant to section 19a-36, establish minimum requirements for household and small commercial subsurface sewage disposal systems and procedures for the issuance of such permits or approvals by the local director of health or a sanitarian registered pursuant to chapter 395. As used in this subsection, household and small commercial disposal systems shall include those subsurface sewage disposal systems with a capacity of [five] seven thousand five hundred gallons per day or less. Notwithstanding any provision of the general statutes or regulations of Connecticut state agencies, the regulations adopted by the commissioner pursuant to this subsection that are in effect as of July 1, 2017, shall apply to household and small commercial subsurface sewage disposal systems with a capacity of seven thousand five hundred gallons per day or less. Any permit denied by the Commissioner of Public Health, or a director of health or registered sanitarian shall be subject to hearing and appeal in the manner provided in section 19a-229. Any permit granted by said

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1132 Commissioner of Public Health, or a director of health or registered

- sanitarian on or after October 1, 1977, shall be deemed equivalent to a
- permit issued under subsection (b) of this section.
- 1135 Sec. 31. Subsection (a) of section 19a-492e of the general statutes is
- 1136 repealed and the following is substituted in lieu thereof (Effective from
- 1137 *passage*):
- 1138 (a) For purposes of this section "home health care agency" has the
- same meaning as provided in section 19a-490, as amended by this act.
- 1140 Notwithstanding the provisions of chapter 378, a registered nurse may
- delegate the administration of medications that are not administered
- 1142 by injection to homemaker-home health aides who have obtained
- 1143 certification and recertification every three years thereafter for
- 1144 medication administration in accordance with regulations adopted
- 1145 pursuant to subsection (b) of this section, unless the prescribing
- practitioner specifies that a medication shall only be administered by a
- 1147 licensed nurse. Any homemaker-home health aide who obtained
- certification in the administration of medications on or before June 30,
- 2015, shall obtain recertification on or before July 1, 2018.
- 1150 Sec. 32. Subsection (b) of section 19a-495a of the general statutes is
- repealed and the following is substituted in lieu thereof (*Effective from*
- 1152 *passage*):
- 1153 (b) Each residential care home, as defined in section 19a-490, as
- amended by this act, shall ensure that [, on or before January 1, 2010,]
- an appropriate number of unlicensed personnel, as determined by the
- 1156 residential care home, obtain certification and recertification for the
- administration of medication. Certification and recertification of such
- personnel shall be in accordance with regulations adopted pursuant to
- this section, except any personnel who obtained certification in the
- administration of medication on or before June 30, 2015, shall obtain
- 1161 recertification on or before July 1, 2018. Unlicensed personnel
- 1162 obtaining such certification and recertification may administer
- medications that are not administered by injection to residents of such

homes, unless a resident's physician specifies that a medication only be administered by licensed personnel.

- Sec. 33. Section 20-474 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2017*):
- As used in sections 20-474 to 20-482, inclusive, subsections (e) and (f) of section 19a-88, as amended by this act, and section 19a-111:
- 1170 (1) "Abatement" means any set of measures designed to eliminate 1171 lead hazards in accordance with standards established pursuant to 1172 sections 20-474 to 20-482, inclusive, and subsections (e) and (f) of 1173 section 19a-88, as amended by this act, and regulations adopted 1174 thereunder, including, but not limited to, the encapsulation, 1175 replacement, removal, enclosure or covering of paint, plaster, soil or 1176 other material containing toxic levels of lead and all preparation, clean-1177 up, disposal and reoccupancy clearance testing;
- 1178 (2) "Certificate" means a document issued by the department 1179 indicating successful completion of an approved training course;
- 130 (3) "Code enforcement official" means the director of health or a person authorized by [him] the director to act on [his] the director's behalf, the local housing code official or a person authorized by [him] the local housing code official to act on [his] the local housing code official's behalf, or an agent of the commissioner;
- 1185 (4) "Commissioner" means the Commissioner of Public Health, or 1186 the commissioner's designee;
- 1187 (5) "Department" means the Department of Public Health;
- 1188 (6) "Director of health" means a municipal health director or a district director of health as defined in chapters 368e and 368f;
- 17) (7) "Dwelling" means every building or shelter used or intended for human habitation, including exterior surfaces and all common areas thereof, and the exterior of any other structure located within the same

- lot, even if not used for human habitation;
- 1194 (8) "Dwelling unit" means a room or group of rooms within a 1195 dwelling arranged for use as a single household by one or more
- individuals living together who share living and sleeping facilities;
- 1197 (9) "Entity" means any person, partnership, firm, association,
- 1198 corporation, limited liability company, sole proprietorship or any other
- 1199 business concern, state or local government agency or political
- 1200 subdivision or authority thereof, or any religious, social or union
- organization, whether operated for profit or otherwise;
- 1202 [(10) "Inspection" means an investigation to determine the presence
- of lead in paint, lead in other surface coverings, lead in dust, lead in
- soil or lead in drinking water, and the provision of a report explaining
- the results of the investigation;
- 1206 (11) "Inspector" means an individual who performs inspections
- solely for the purpose of determining the presence of lead-based paint
- 1208 and surface coverings and lead in soil, dust and drinking water
- 1209 through the use of on-site testing including, but not limited to, x-ray
- 1210 fluorescence (XRF) analysis with portable analytical instruments, and
- 1211 the collection of samples for laboratory analysis and who collects
- information designed to assess the level of risk;
- 1213 [(12)] (10) "Lead abatement contractor" means any entity which
- 1214 contracts to perform lead hazard reduction by means of abatement
- including, but not limited to, the encapsulation, replacement, removal,
- 1216 enclosure or covering of paint, plaster, soil or other material containing
- toxic levels of lead;
- 1218 [(13)] (11) "Lead abatement supervisor" means an individual who
- 1219 oversees lead abatement activities;
- 1220 [(14)] (12) "Lead abatement worker" means an individual who
- 1221 performs lead abatement activities;
- 1222 [(15) "Lead consultant" means any person who performs lead

detection, risk assessment, abatement design or related services in 1223 1224 disciplines including inspector and planner-project designer; 1225 [(16)] (13) "Lead consultant contractor" means any entity which 1226 contracts to perform lead hazard reduction consultation work utilizing 1227 [an] a lead inspector, lead inspection risk assessor or lead planner-1228 project designer; 1229 (14) "Lead inspection" means an investigation to determine the 1230 presence of lead in paint, lead in other surface coverings, lead in dust, 1231 lead in soil or lead in drinking water, and the provision of a report 1232 explaining the results of the investigation; 1233 (15) "Lead inspector" means an individual who performs inspections 1234 solely for the purpose of determining the presence of lead-based paint 1235 and surface coverings and lead in soil, dust and drinking water 1236 through the use of on-site testing including, but not limited to, x-ray 1237 fluorescence (XRF) analysis with portable analytical instruments, and 1238 the collection of samples for laboratory analysis and who collects 1239 information designed to assess the level of risk; 1240 (16) "Lead inspector risk assessor" means an individual who (A) performs (i) lead inspection risk assessments for the purpose of 1241 determining the presence, type, severity and location of lead-based 1242 1243 paint hazards, including lead hazards in paint, dust, drinking water and soil, through the use of on-site testing, including, but not limited 1244 1245 to, x-ray (XRF) fluorescence analysis with portable instruments, and 1246 (ii) the collection of samples for laboratory analysis, and (B) provides 1247 suggested ways to control any identified lead hazards; (17) "Lead planner-project designer" means an individual who 1248 1249 designs lead abatement and management activities;

abatement or lead consultant services;

(18) "Lead training provider" means an entity that offers an

approved training course or refresher training course in lead

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[(17)] (19) "License" means the whole or part of any department permit, approval or similar form of permission required by the general statutes and which further requires: (A) Practice of the profession by licensed persons or entities only; (B) that a person or entity demonstrate competence to practice through an examination or other means and meet certain minimum standards; and (C) enforcement of standards by the department;

- 1260 [(18) "Planner-project designer" means an individual who designs 1261 lead abatement and management activities;]
- 1262 [(19)] (20) "Premises" means the area immediately surrounding a dwelling;
- 1264 [(20)] (21) "Refresher training course" means an annual, 1265 supplemental training course for personnel engaged in lead abatement 1266 or lead consultation services; <u>and</u>
- [(21)] (22) "Training course" means an approved training course offered by a training provider for persons seeking instruction in lead abatement or lead consultation services. [; and]
- [(22) "Training provider" means an entity which offers an approved training course or refresher training course in lead abatement or lead consultation services.]
- Sec. 34. Section 20-476 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2017*):
 - On and after [the effective date of regulations adopted pursuant to section 20-478] October 1, 2017, no person shall hold himself or herself out as a [lead consultant] lead training provider, lead inspector, lead inspector risk assessor, lead planner-project designer, lead abatement supervisor or a lead abatement worker as defined in regulations adopted pursuant to section 20-478, as amended by this act, in this state without a certificate issued by the Commissioner of Public Health. Applications for such certificate shall be made to the

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department on forms provided by it and shall be accompanied by a fee of fifty dollars, and shall contain such information regarding the applicant's qualifications as the department may require in regulations adopted pursuant to said section 20-478, as amended by this act. No person shall be issued a certificate to act as a [lead consultant] lead training provider, lead inspector, lead inspector risk assessor, lead planner-project designer, lead abatement supervisor or lead abatement worker unless such person obtains such approval. The commissioner may issue a certificate under this section to any person who is licensed or certified in another state under a law which provides standards which are equal to or higher than those of Connecticut and is not subject to any unresolved complaints or pending disciplinary actions. Certificates issued pursuant to this section shall be renewed annually in accordance with the provisions of section 19a-88, as amended by this act, upon payment of a fee of fifty dollars.

- Sec. 35. Section 20-477 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2017*):
- (a) [On and after July 1, 1994, all] All training courses and refresher training courses offered by lead training providers for persons seeking instruction as a lead [consultant, including] inspector, [or] lead inspector risk assessor, lead planner-project designer, lead abatement supervisor [and] or lead abatement worker, shall be approved by the department and shall be conducted in accordance with the requirements of this section. Each application for approval of each training course offered by a lead training provider shall be accompanied by a fee of one thousand two hundred fifty dollars. Each application for approval of each refresher training course offered by a training provider shall be accompanied by a fee of three hundred fifteen dollars. Each training course shall be reapproved by the department every three years. Each lead training provider shall pay a fee of one thousand two hundred fifty dollars for application for reapproval of each training course in accordance with this section. Each refresher training course shall be reapproved by the department every three years. Each refresher lead training provider shall pay a fee

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of three hundred fifteen dollars for application for reapproval of each refresher training course in accordance with this section. No fee shall be imposed upon training courses or refresher training courses operated and provided by the state, municipalities or nonprofit agencies. In order to facilitate uniformity among states in regulatory programs for lead abatement and lead [consultant personnel] inspectors, lead inspector risk assessors and lead planner-project designers and reciprocity of licensure and certification programs, the commissioner may establish liaisons with other states having state certification or licensure programs.

- (b) (1) A <u>lead</u> training provider seeking approval of a training course or a refresher training course shall submit to the department completed application forms provided by the department and other associated material and such information as the department shall require to establish compliance with the requirements of this section.
- (2) A <u>lead</u> training provider may offer any training course or refresher training course as desired, provided each course is approved by the department. Only training providers who have already received approval for a training course in a particular discipline, or are concurrently seeking such approval, may seek approval for a refresher training course in that discipline.
 - (3) Training course curricula shall encompass topics and materials as established by the commissioner. These curricula shall conform to standards or guidance for such course as established by the federal Environmental Protection Agency or such other federal agencies as may have jurisdiction.
 - (4) Training courses and refresher training courses shall utilize staff and faculty who comply with educational and experience standards as established by the commissioner. These standards shall conform to standards or guidance for such personnel qualifications as established by the federal Environmental Protection Agency or such other federal agencies as may have jurisdiction.

(c) Refresher training courses for each training course shall include the following: (1) An overview of key safety practices; (2) an update on new federal, state and local laws and regulations; and (3) an update on new technologies. Each refresher course shall consist of a minimum of seven training hours.

- (d) Each <u>lead</u> training provider shall administer a closed book objective examination at the completion of each training or refresher training course. Such examination shall be an evaluation of the knowledge and skills acquired by each student. The course examination shall cover the course curriculum taught in each course. [Training] <u>Lead training</u> providers shall establish a passing standard for each course examination, provided such standard shall not be lower than seventy per cent correct.
- (e) The department may conduct an audit of any training course or refresher training course prior to reapproval. The <u>lead</u> training provider shall submit an application for reapproval not earlier than one hundred eighty days or later than ninety days before the current course approval expires. In the event an audit is performed, the following elements may be examined: (1) Course materials; (2) instructor competency; (3) validity and security of the course examination; (4) the conduct of hands-on skills assessments; (5) adequacy of the facility and equipment; and (6) the training course quality control plan.
- (f) Each <u>lead</u> training provider shall retain the following information: (1) Records of staff and faculty qualifications; (2) curriculum and course materials; (3) course examination or pool of examination questions; (4) information on how hands-on skills assessments were conducted; and (5) student files grouped alphabetically by class and year. Each student file shall contain results of the hands-on skills assessment and the examination and copies of any course completion certificate issued. The <u>lead</u> training provider shall retain these records at the location specified on the <u>lead</u> training provider's approved application for a minimum of three years.

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(g) The department may, after opportunity for hearing, suspend, revoke or withdraw approval of a training or refresher training course upon a finding that a training course provider has committed any of the following acts: (1) Misrepresentation or concealment of a material fact in the obtaining of approval or reapproval of a training or a refresher training course; (2) failure to submit required information or notifications in a timely manner; (3) failure to maintain requisite records; (4) falsification of records, instructor qualifications or other approval information; (5) failure to adhere to the training standards and requirements of this section; (6) failure on the part of the training manager or other person with supervisory authority over the delivery of training to comply with federal, state or local lead statutes or regulations; or (7) fraudulent issuance of a course completion document to a person who has failed to successfully complete the course or course examination. Notice of any contemplated action under this subsection, the cause of action and the date of a hearing on the action shall be given and an opportunity for hearing afforded in accordance with the provisions of chapter 54. The commissioner may petition the superior court for the judicial district of Hartford to enforce any order or action taken pursuant to this subsection. The provisions of this subsection shall not apply to applications for approval or reapproval filed pursuant to this section.

- (h) The commissioner may adopt regulations, in accordance with the provisions of chapter 54, requiring that applicants successfully complete an examination prescribed by the department, for certification in the following professions: Lead [consultant,] <u>inspector, lead inspector risk assessor, lead planner-project designer and lead abatement supervisor.</u> [and lead abatement worker.]
- Sec. 36. Section 20-479 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2017*):
- The provisions of section 20-476, as amended by this act, shall not apply to a code enforcement official acting within the scope of his <u>or her</u> duties, provided, within one year of July 1, 1994, no code

1415 enforcement official shall perform the duties of a lead [consultant]

- inspector, lead inspector risk assessor or lead planner-project designer
- unless he <u>or she</u> has successfully completed an appropriate approved
- training course and an annual refresher training as specified in section
- 1419 20-477, as amended by this act, or complies with the standards
- 1420 established in regulations adopted pursuant to section 20-478, as
- 1421 <u>amended by this act</u>.
- Sec. 37. Section 20-480 of the general statutes is repealed and the
- 1423 following is substituted in lieu thereof (*Effective July 1, 2017*):
- The provisions of sections 20-475 to 20-477, inclusive, as amended
- by this act, shall not apply to an employee of the Labor Department
- 1426 performing his <u>or her</u> duties in accordance with chapter 571 nor to a
- 1427 federal employee of the Occupational Safety and Health
- 1428 Administration performing his <u>or her</u> duties, in accordance with the
- 1429 federal Occupational Safety and Health Act.
- Sec. 38. (NEW) (Effective July 1, 2017) The department may take any
- action set forth in section 19a-17 of the general statutes, as amended by
- this act, and subsection (f) of section 19a-88 of the general statutes, as
- amended by this act, against a person or entity licensed or certified
- 1434 pursuant to chapter 400a of the general statutes, for reasons including,
- but not limited to, the following: (1) Conviction of a felony; (2) fraud or
- deceit in the practice of such person's or entity's profession; (3)
- 1437 negligent, incompetent or wrongful conduct in professional activities;
- 1438 (4) misrepresentation or concealment of a material fact in the
- obtaining, reinstatement or renewal of a license or certificate; or (5)
- violation of any provision of chapter 400a of the general statutes, or
- 1441 any regulation adopted thereunder. The commissioner may petition
- the superior court for the judicial district of Hartford to enforce such order or any action taken pursuant to section 19a-17 of the general
- statutes, as amended by this act. Notice of any contemplated action
- under section 19a-17 of the general statutes, as amended by this act,
- 1446 the cause of action and the date of a hearing on the action shall be
- 1447 given and an opportunity for hearing afforded in accordance with the

- provisions of chapter 54 of the general statutes.
- Sec. 39. Subsection (c) of section 19a-14 of the general statutes is
- repealed and the following is substituted in lieu thereof (Effective July
- 1451 1, 2017):
- (c) No board shall exist for the following professions that are
- licensed or otherwise regulated by the Department of Public Health:
- 1454 (1) Speech and language pathologist and audiologist;
- 1455 (2) Hearing instrument specialist;
- 1456 (3) Nursing home administrator;
- 1457 (4) Sanitarian;
- 1458 (5) Subsurface sewage system installer or cleaner;
- (6) Marital and family therapist;
- 1460 (7) Nurse-midwife;
- 1461 (8) Licensed clinical social worker;
- 1462 (9) Respiratory care practitioner;
- 1463 (10) Asbestos contractor, [and] asbestos consultant and asbestos
- 1464 training provider;
- 1465 (11) Massage therapist;
- 1466 (12) Registered nurse's aide;
- 1467 (13) Radiographer;
- 1468 (14) Dental hygienist;
- 1469 (15) Dietitian-Nutritionist;
- 1470 (16) Asbestos abatement worker;

1471	(17) Asbestos abatement site supervisor;
1472	(18) Licensed or certified alcohol and drug counselor;
1473	(19) Professional counselor;
1474	(20) Acupuncturist;
1475	(21) Occupational therapist and occupational therapist assistant;
1476	(22) Lead abatement contractor, lead consultant contractor, lead
1477	consultant, lead abatement supervisor, lead abatement worker, lead
1478	training provider, lead inspector, lead inspector risk assessor and lead
1479	planner-project designer;
1480	(23) Emergency medical technician, advanced emergency medical
1481	technician, emergency medical responder and emergency medical
1482	services instructor;
1483	(24) Paramedic;
1484	(25) Athletic trainer;
1485	(26) Perfusionist;
1486	(27) Master social worker subject to the provisions of section 20-
1487	195v;
1488	(28) Radiologist assistant, subject to the provisions of section 20-74tt;
1489	(29) Homeopathic physician;
1490	(30) Certified water treatment plant operator, certified distribution
1491	system operator, certified small water system operator, certified
1492	backflow prevention device tester and certified cross connection
1493	survey inspector, including certified limited operators, certified
1494	conditional operators and certified operators in training;
1495	(31) Tattoo technician; [and]

- 1496 (32) Genetic counselor; and
- 1497 (33) Behavior analyst.
- 1498 The department shall assume all powers and duties normally vested
- 1499 with a board in administering regulatory jurisdiction over such
- 1500 professions. The uniform provisions of this chapter and chapters 368v,
- 1501 369 to 381a, inclusive, 383 to 388, inclusive, 393a, 395, 398, 399, 400a
- 1502 and 400c, including, but not limited to, standards for entry and
- 1503 renewal; grounds for professional discipline; receiving and processing
- 1504 complaints; and disciplinary sanctions, shall apply, except as otherwise
- 1505 provided by law, to the professions listed in this subsection.
- 1506 Sec. 40. Subsection (e) of section 19a-88 of the general statutes is
- 1507 repealed and the following is substituted in lieu thereof (Effective July
- 1508 1, 2017):
- 1509 (e) (1) Each person holding a license or certificate issued under
- 1510 section 19a-514, 20-65k, 20-74s, as amended by this act, 20-195cc or 20-
- 1511 206ll and chapters 370 to 373, inclusive, 375, 378 to 381a, inclusive, 383
- 1512 to 383c, inclusive, 384, 384a, 384b, 384d, 385, 393a, 395, 399 or 400a,
- 1513 [and] section 20-206n or 20-2060 and section 53 or 54 of this act shall,
- 1514 annually, during the month of such person's birth, apply for renewal of
- 1515 such license or certificate to the Department of Public Health, giving
- 1516 such person's name in full, such person's residence and business
- 1517 address and such other information as the department requests.
- 1518 (2) Each person holding a license or certificate issued under section
- 1519 19a-514, section 20-2660 and chapters 384a, 384c, 386, 387, 388 and 398
- 1520 shall apply for renewal of such license or certificate once every two
- 1521 years, during the month of such person's birth, giving such person's
- 1522 name in full, such person's residence and business address and such
- 1523 other information as the department requests.
- 1524 (3) Each person holding a license or certificate issued pursuant to
- 1525 [section 20-475 or 20-476] chapter 400c shall, annually, during the
- 1526 month of such person's birth, apply for renewal of such license or

1527 certificate to the department.

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- 1528 (4) Each entity holding a license issued pursuant to section 20-475 1529 shall, annually, during the anniversary month of initial licensure, 1530 apply for renewal of such license or certificate to the department.
- (5) Each person holding a license issued pursuant to section 20-162bb shall, annually, during the month of such person's birth, apply for renewal of such license to the Department of Public Health, upon payment of a fee of three hundred twenty dollars, giving such person's name in full, such person's residence and business address and such other information as the department requests.
- Sec. 41. Section 20-439 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2017*):

On and after the effective date of regulations adopted pursuant to section 20-440, asbestos abatement or asbestos consultation training programs serving to qualify asbestos abatement workers and asbestos abatement site supervisors for certification and asbestos consultants for certification shall be approved by the department.] For purposes of this section, "asbestos training provider" means a person or entity that offers a training program for asbestos abatement or asbestos consultation and certifies asbestos abatement workers, asbestos abatement site supervisors and asbestos consultants. On and after October 1, 2017, each asbestos training provider shall be certified by the department. The department shall issue an initial certification of a provider upon the provider's completion of an application and payment of a fee of fifty dollars. The certification issued pursuant to this section shall be renewed annually in accordance with the provisions of subsection (e) of section 19a-88, as amended by this act, upon payment of a fee of fifty dollars. The department shall approve a training program upon determination that such program complies with such requirements as may be established in regulations adopted pursuant to section 20-440. Each application or reapplication for approval of a training program shall be accompanied by a fee of five

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1559 hundred dollars. Each application for approval or reapproval of a 1560 refresher training program as required by section 20-441 shall be 1561 accompanied by a fee of two hundred fifty dollars. Each [person 1562 offering an asbestos abatement or asbestos consultation training program] asbestos training provider shall furnish the department with 1563 1564 a list of the persons who have successfully completed the course 1565 within thirty days of such completion. The department shall conduct 1566 periodic reviews of approved training courses and may revoke 1567 approval at any time it determines that the course fails to meet the 1568 requirements established in such regulations.

- Sec. 42. Section 20-478 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2017*):
- 1571 The commissioner shall adopt regulations, in accordance with the 1572 provisions of chapter 54, to administer the provisions of sections 20-1573 475 and 20-476, as amended by this act. Such regulations shall include, 1574 but not be limited to, the following: (1) Standards for licensure of lead 1575 abatement contractors and lead consultant contractors; (2) passing 1576 scores for [licensure examination of lead abatement contractors and 1577 lead consultant contractors] certification examinations of lead 1578 inspectors, lead inspector risk assessors and lead abatement 1579 supervisors; and (3) standards for certification of [lead consultants] 1580 lead inspectors, lead inspector risk assessors, lead planner-project 1581 designers, lead abatement supervisors and lead abatement workers.
- Sec. 43. Section 19a-342 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- 1584 (a) As used in this section, "smoke" or "smoking" means the lighting or carrying of a lighted cigarette, cigar, pipe or similar device.
- (b) (1) Notwithstanding the provisions of section 31-40q, <u>as</u> amended by this act, no person shall smoke: (A) In any building or portion of a building owned and operated or leased and operated by the state or any political subdivision thereof; (B) in any area of a health care institution; (C) in any area of a retail food store; (D) in any

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restaurant; (E) in any area of an establishment with a permit issued for the sale of alcoholic liquor pursuant to section 30-20a, 30-21, 30-21b, 30-22, 30-22c, 30-28, 30-28a, 30-33a, 30-33b, 30-35a, 30-37a, 30-37e or 30-37f, in any area of an establishment with a permit for the sale of alcoholic liquor pursuant to section 30-23 issued after May 1, 2003, and, on and after April 1, 2004, in any area of an establishment with a permit issued for the sale of alcoholic liquor pursuant to section 30-22a or 30-26 or the bar area of a bowling establishment holding a permit pursuant to subsection (a) of section 30-37c, as amended by this act; (F) within a school building while school is in session or student activities are being conducted; (G) in any passenger elevator, provided no person shall be arrested for violating this subsection unless there is posted in such elevator a sign which indicates that smoking is prohibited by state law; (H) in any dormitory in any public or private institution of higher education; or (I) on and after April 1, 2004, in any area of a dog race track or a facility equipped with screens for the simulcasting of offtrack betting race programs or jai alai games. For purposes of this subsection, "restaurant" means space, in a suitable and permanent building, kept, used, maintained, advertised and held out to the public to be a place where meals are regularly served to the public.

(2) This section shall not apply to (A) correctional facilities; (B) designated smoking areas in psychiatric facilities; (C) public housing projects, as defined in subsection (b) of section 21a-278a; (D) [classrooms] any classroom where demonstration smoking is taking place as part of a medical or scientific experiment or lesson; (E) smoking rooms provided by employers for employees, pursuant to section 31-40q, as amended by this act; (F) notwithstanding the provisions of subparagraph (E) of subdivision (1) of this subsection, the outdoor portion of the premises of any permittee listed in subparagraph (E) of subdivision (1) of this subsection, provided, in the case of any seating area maintained for the service of food, at least seventy-five per cent of the outdoor seating capacity is an area in which smoking is prohibited and which is clearly designated with written signage as a nonsmoking area, except that any temporary

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seating area established for special events and not used on a regular basis shall not be subject to the smoking prohibition or signage requirements of this subparagraph; [or] (G) any medical research site where smoking is integral to the research being conducted; or (H) any tobacco bar, provided no tobacco bar shall expand in size or change its location from its size or location as of December 31, 2002. For purposes of this subdivision, "outdoor" means an area which has no roof or other ceiling enclosure, "tobacco bar" means an establishment with a permit for the sale of alcoholic liquor to consumers issued pursuant to chapter 545 that, in the calendar year ending December 31, 2002, generated ten per cent or more of its total annual gross income from the on-site sale of tobacco products and the rental of on-site humidors, and "tobacco product" means any substance that contains tobacco, including, but not limited to, cigarettes, cigars, pipe tobacco or chewing tobacco.

- (c) The operator of a hotel, motel or similar lodging may allow guests to smoke in not more than twenty-five per cent of the rooms offered as accommodations to guests.
- (d) In each room, elevator, area or building in which smoking is prohibited by this section, the person in control of the premises shall post or cause to be posted in a conspicuous place signs stating that smoking is prohibited by state law. Such signs, except in elevators, restaurants, establishments with permits to sell alcoholic liquor to consumers issued pursuant to chapter 545, hotels, motels or similar lodgings, and health care institutions, shall have letters at least four inches high with the principal strokes of letters not less than one-half inch wide.
- (e) Any person found guilty of smoking in violation of this section, failure to post signs as required by this section or the unauthorized removal of such signs shall have committed an infraction. Nothing in this section shall be construed to require the person in control of a building to post such signs in every room of a building, provided such signs are posted in a conspicuous place in such building.

1658 (f) Nothing in this section shall be construed to require any smoking 1659 area in any building.

- (g) The provisions of this section shall supersede and preempt the provisions of any municipal law or ordinance relative to smoking effective prior to, on or after October 1, 1993.
- Sec. 44. Section 19a-342a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
- 1665 (a) As used in this section and section 2 of public act 15-206:

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- 1666 (1) "Child care facility" means a provider of child care services as 1667 defined in section 19a-77, or a person or entity required to be licensed 1668 under section 17a-145;
 - (2) "Electronic nicotine delivery system" means an electronic device that may be used to simulate smoking in the delivery of nicotine or other substances to a person inhaling from the device, and includes, but is not limited to, an electronic cigarette, electronic cigar, electronic cigarillo, electronic pipe or electronic hookah and any related device and any cartridge or other component of such device;
 - (3) "Liquid nicotine container" means a container that holds a liquid substance containing nicotine that is sold, marketed or intended for use in an electronic nicotine delivery system or vapor product, except "liquid nicotine container" does not include such a container that is prefilled and sealed by the manufacturer and not intended to be opened by the consumer; and
 - (4) "Vapor product" means any product that employs a heating element, power source, electronic circuit or other electronic, chemical or mechanical means, regardless of shape or size, to produce a vapor that may or may not include nicotine, that is inhaled by the user of such product, but shall not include a medicinal or therapeutic product used by a (A) licensed health care provider to treat a patient in a health care setting, or (B) a patient, as prescribed or directed by a licensed

1688 <u>health care provider in any setting.</u>

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(b) (1) No person shall use an electronic nicotine delivery system or vapor product: (A) In any building or portion of a building owned and operated or leased and operated by the state or any political subdivision thereof; (B) in any area of a health care institution; (C) in any area of a retail food store; (D) in any restaurant; (E) in any area of an establishment with a permit issued for the sale of alcoholic liquor pursuant to section 30-20a, 30-21, 30-21b, 30-22, 30-22a, 30-22c, 30-26, 30-28, 30-28a, 30-33a, 30-33b, 30-35a, 30-37a, 30-37e or 30-37f, in any area of establishment with a permit issued for the sale of alcoholic liquor pursuant to section 30-23 issued after May 1, 2003, or the bar area of a bowling establishment holding a permit pursuant to subsection (a) of section 30-37c; (F) within a school building while school is in session or student activities are being conducted; (G) within a child care facility, except, if the child care facility is a family child care home as defined in section 19a-77, such use is prohibited only when a child enrolled in such home is present; (H) in any passenger elevator, provided no person shall be arrested for violating this subsection unless there is posted in such elevator a sign which indicates that such use is prohibited by state law; (I) in any dormitory in any public or private institution of higher education; or (J) in any area of a dog race track or a facility equipped with screens for the simulcasting of off-track betting race programs or jai alai games. For purposes of this subsection, "restaurant" means space, in a suitable and permanent building, kept, used, maintained, advertised and held out to the public to be a place where meals are regularly served to the public.

(2) This section shall not apply to (A) correctional facilities; (B) designated smoking areas in psychiatric facilities; (C) public housing projects, as defined in subsection (b) of section 21a-278a; (D) [classrooms] <u>any classroom</u> where a demonstration of the use of an electronic nicotine delivery system or vapor product is taking place as part of a medical or scientific experiment or lesson; (E) <u>any medical</u> research site where the use of an electronic nicotine delivery system or

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vapor product is integral to the research being conducted; (F) establishments without a permit for the sale of alcoholic liquor that sell electronic nicotine delivery systems, vapor products or liquid nicotine containers on-site and allow their customers to use such systems, products or containers on-site; [(F)] (G) smoking rooms provided by employers for employees, pursuant to section 31-40q, as amended by this act; [(G)] (H) notwithstanding the provisions of subparagraph (E) of subdivision (1) of this subsection, the outdoor portion of the premises of any permittee listed in subparagraph (E) of subdivision (1) of this subsection, provided, in the case of any seating area maintained for the service of food, at least seventy-five per cent of the outdoor seating capacity is an area in which smoking is prohibited and which is clearly designated with written signage as a nonsmoking area, except that any temporary seating area established for special events and not used on a regular basis shall not be subject to the prohibition on the use of an electronic nicotine delivery system or vapor product or the signage requirements of this subparagraph; or [(H)] (I) any tobacco bar, provided no tobacco bar shall expand in size or change its location from its size or location as of October 1, 2015. For purposes of this subdivision, "outdoor" means an area which has no roof or other ceiling enclosure, "tobacco bar" means an establishment with a permit for the sale of alcoholic liquor to consumers issued pursuant to chapter 545 that, in the calendar year ending December 31, 2015, generated ten per cent or more of its total annual gross income from the on-site sale of tobacco products and the rental of on-site humidors, and "tobacco product" means any substance that contains tobacco, including, but not limited to, cigarettes, cigars, pipe tobacco or chewing tobacco.

- (c) The operator of a hotel, motel or similar lodging may allow guests to use an electronic nicotine delivery system or vapor product in not more than twenty-five per cent of the rooms offered as accommodations to guests.
- (d) In each room, elevator, area or building in which the use of an electronic nicotine delivery system or vapor product is prohibited by this section, the person in control of the premises shall post or cause to

be posted in a conspicuous place signs stating that such use is prohibited by state law. Such signs, except in elevators, restaurants, establishments with permits to sell alcoholic liquor to consumers issued pursuant to chapter 545, hotels, motels or similar lodgings, and health care institutions, shall have letters at least four inches high with the principal strokes of letters not less than one-half inch wide.

- (e) Any person found guilty of using an electronic nicotine delivery system or vapor product in violation of this section, failure to post signs as required by this section or the unauthorized removal of such signs shall have committed an infraction.
- (f) Nothing in this section shall be construed to require the designation of any area for the use of electronic nicotine delivery system or vapor product in any building.
- (g) The provisions of this section shall supersede and preempt the provisions of any municipal law or ordinance relative to the use of an electronic nicotine delivery system or vapor product effective prior to, on or after October 1, 2015.
- Sec. 45. Subsection (b) of section 53-344 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
 - (b) Any person who sells, gives or delivers to any [minor] person under eighteen years of age tobacco [, unless the minor is delivering or accepting delivery in such person's capacity as an employee, in any form] shall be fined not more than two hundred dollars for the first offense, not more than three hundred fifty dollars for a second offense within [an eighteen-month] a twenty-four-month period and not more than five hundred dollars for each subsequent offense within [an eighteen-month] a twenty-four-month period. The provisions of this subsection shall not apply to a person under eighteen years of age who is delivering or accepting delivery of tobacco (1) in such person's capacity as an employee, or (2) as part of a scientific study being conducted by an organization for the purpose of medical research to

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1788 <u>further efforts in tobacco use prevention and cessation, provided such</u>

- medical research has been approved by the organization's institutional
- 1790 review board, as defined in section 21a-408.
- 1791 Sec. 46. Subsection (b) of section 53-344b of the general statutes is
- 1792 repealed and the following is substituted in lieu thereof (Effective
- 1793 *October 1, 2017*):

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- 1794 (b) Any person who sells, gives or delivers to any [minor] person 1795 under eighteen years of age an electronic nicotine delivery system or 1796 vapor product [, unless the minor is delivering or accepting delivery in such person's capacity as an employee, in any form shall be fined not 1797 1798 more than two hundred dollars for the first offense, not more than 1799 three hundred fifty dollars for a second offense within [an eighteen-1800 month] a twenty-four-month period and not more than five hundred 1801 dollars for each subsequent offense within [an eighteen-month] a 1802 twenty-four-month period. The provisions of this subsection shall not 1803 apply to a person under eighteen years of age who is delivering or 1804 accepting delivery of an electronic nicotine delivery system or vapor 1805 product (1) in such person's capacity as an employee, or (2) as part of a 1806 scientific study being conducted by an organization for the purpose of 1807 medical research to further efforts in tobacco use prevention and 1808 cessation, provided such medical research has been approved by the 1809 organization's institutional review board, as defined in section 21a-408.
- Sec. 47. Subdivision (4) of subsection (a) of section 31-40q of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):
 - (4) "Business facility" means a structurally enclosed location or portion thereof at which employees perform services for their employer. The term "business facility" does not include: (A) Facilities listed in subparagraph (A), (C) or [(G)] (H) of subdivision (2) of subsection (b) of section 19a-342, as amended by this act; (B) any establishment with a permit for the sale of alcoholic liquor pursuant to section 30-23 issued on or before May 1, 2003; (C) for any business that

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is engaged in the testing or development of tobacco or tobacco products, the areas of such business designated for such testing or development; or (D) during the period from October 1, 2003, to April 1, 2004, establishments with a permit issued for the sale of alcoholic liquor pursuant to section 30-22a or 30-26 or the bar area of a bowling establishment holding a permit pursuant to subsection (a) of section 30-37c.

Sec. 48. (NEW) (Effective from passage) (a) Not later than October 1, 2017, and annually thereafter, any hospital that has been certified as a comprehensive stroke center, a primary stroke center or an acute stroke-ready hospital by the American Heart Association, the Joint Commission or any other nationally recognized certifying organization shall submit an attestation of such certification to the Commissioner of Public Health, in a form and manner prescribed by the commissioner. Not later than October 15, 2017, and annually thereafter, the Department of Public Health shall post a list of certified stroke centers on its Internet web site.

(b) The department may remove a hospital from the list posted pursuant to subsection (a) of this section if (1) the hospital requests such removal, (2) the department is informed by the American Heart Association, the Joint Commission or other nationally recognized certifying organization that a hospital's certification has expired or been suspended or revoked, or (3) the department does not receive attestation of certification from a hospital on or before October first. The department shall report to the nationally recognized certifying organization any complaint it receives related to the certification of a hospital as a comprehensive stroke center, a primary stroke center or an acute stroke-ready hospital. The department shall provide the complainant with the name and contact information of the nationally recognized certifying organization if the complainant seeks to pursue a complaint with such organization.

Sec. 49. (NEW) (*Effective October 1, 2017*) (a) As used in this section, "emergency medical services provider" means a provider licensed or

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1853 certified under chapter 368d of the general statutes.

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(b) Not later than January 1, 2018, and annually thereafter, the Department of Public Health shall send a list of each hospital designated under section 48 of this act as a comprehensive stroke center, primary stroke center or acute stroke-ready center to the medical director of each emergency medical services provider in the state. The Department of Public Health shall maintain a copy of the list in the Office of Emergency Medical Services.

- (c) Not later than January 1, 2018, the Connecticut Emergency Medical Services Advisory Board Committee, established under section 19a-178a of the general statutes, shall recommend to the Commissioner of Public Health, for adoption, a nationally recognized standardized stroke triage assessment tool and prehospital care protocols related to the assessment, treatment and transport of stroke patients. Not later than thirty days after receiving recommendations regarding the stroke triage assessment tool and prehospital care protocols, the Commissioner of Public Health shall adopt such stroke triage assessment tool and post such assessment tool and protocols on its Internet web site. The commissioner may make any modifications to such assessment tool as the commissioner deems necessary. The department shall distribute a copy of the stroke triage assessment tool and prehospital care protocols to each emergency medical services provider. Upon receipt of such assessment tool and protocols, each emergency medical services provider shall develop plans to implement such assessment tool and protocols for the triage and transport of acute stroke patients.
- Sec. 50. Section 19a-90 of the general statutes, as amended by section 1880 1 of public act 17-6, is repealed and the following is substituted in lieu 1881 thereof (*Effective July 1, 2017*):
 - (a) A health care provider giving prenatal care to a pregnant woman in this state during gestation shall order a blood sample of such woman for each of the following serological tests: (1) Not later than

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thirty days after the date of the first prenatal examination, a serological test for HIV and syphilis; (2) not later than twenty-eight to thirty-two weeks of gestation, a serological test for syphilis; (3) not later than thirty-two to thirty-six weeks of gestation, a serological test for HIV; and (4) at the time of delivery, a serological test for HIV and syphilis, provided the woman presents to labor and delivery without documentation of the required serological testing prescribed under subdivisions (2) and (3) of this subsection. No pregnant woman shall be subject to serological testing more than once during each of the time frames outlined in subdivisions (1) to (4), inclusive. A pregnant woman's consent to the HIV-related test, as defined in section 19a-581, shall be consistent with the consent given for the HIV-related test prescribed under section 19a-582, as amended by [this act] public act <u>17-6</u>. The laboratory tests required by this section shall be made on request without charge by the Department of Public Health. For purposes of this subsection, "health care provider" means a physician licensed pursuant to chapter 370, advanced practice registered nurse licensed pursuant to chapter 378, physician assistant licensed pursuant to chapter 370 or nurse midwife licensed pursuant to chapter [372] 377.

- (b) The provisions of this section shall not apply to any woman who
 objects to a blood test as being in conflict with her religious tenets and
 practices.
- Sec. 51. Section 20-185i of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2018*):
- 1909 (a) As used in this section, sections 2 to 5, inclusive, of this act and section 19a-14, as amended by this act:
- (1) "Behavior Analyst Certification Board" means the nonprofit corporation established to meet the professional credentialing needs of behavior analysts, governments and consumers of behavior analysis services and accredited by the National Council for Certifying Agencies in Washington, D.C., or any successor national accreditation organization;

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1917 [(2) "Board certified behavior analyst (BCBA)" means a person who 1918 has been certified as a behavior analyst by the Behavior Analyst 1919 Certification Board; and

- 1920 (3) "Board certified assistant behavior analyst (BCABA)"]
- 1921 (2) "Behavior analysis" means the design, implementation and 1922 evaluation of environmental modifications, using behavior stimuli and 1923 consequences, including the use of direct observation, measurement 1924 and functional analysis of the relationship between the environment 1925 and behavior, to produce socially significant improvement in human 1926 behavior, but does not include: (A) Psychological testing, (B) 1927 neuropsychology, (C) cognitive therapy, (D) sex therapy, (E) 1928 psychoanalysis, (F) hypnotherapy, (G) cognitive behavioral therapy,
- 1929 (H) psychotherapy, or (I) long-term counseling as treatment
- 1930 <u>modalities;</u>
- 1931 (3) "Behavior analyst" means a person who is licensed to practice 1932 behavior analysis under the provisions of section 53 or 54 of this act; 1933 and
- 1934 (4) "Assistant behavior analyst" means a person who has been 1935 certified as an assistant behavior analyst by the Behavior Analyst 1936 Certification Board to assist in the practice of behavior analysis under 1937 the supervision of a behavior analyst.
- 1938 (b) No person, unless certified by the Behavior Analyst Certification 1939 Board as a [board certified behavior analyst or a] board certified 1940 assistant behavior analyst, shall use in connection with his or her name 1941 or place of business: (1) The words ["board certified behavior analyst", 1942 "certified behavior analyst",] "board certified assistant behavior 1943 analyst" or "certified assistant behavior analyst", (2) the letters [, 1944 "BCBA" or TBCABA", or (3) any words, letters, abbreviations or insignia indicating or implying that he or she is a [board certified 1945 1946 behavior analyst or] board certified assistant behavior analyst or in any way, orally, in writing, in print or by sign, directly or by implication, 1947 1948 represent himself or herself as a [board certified behavior analyst or]

board certified assistant behavior analyst. Any person who violates the provisions of this section shall be guilty of a class D felony. For the purposes of this section, each instance of contact or consultation with an individual which is in violation of any provision of this section shall constitute a separate offense.

- Sec. 52. (NEW) (*Effective July 1, 2018*) (a) No person may practice behavior analysis unless licensed pursuant to section 53 or 54 of this act.
- (b) No person may use the title "behavior analyst" or make use of any title, words, letters or abbreviations that may reasonably be confused with licensure as a behavior analyst unless such person is licensed pursuant to section 53 or 54 of this act.

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- (c) The provisions of this section shall not apply to a person who (1) provides behavior analysis or assists in the practice of behavior analysis while acting within the scope of practice of the person's license or certification and training, provided the person does not hold himself or herself out to the public as a behavior analyst, (2) is a student enrolled in a behavior analysis educational program accredited by the Behavior Analyst Certification Board, or a graduate education program in which behavior analysis is an integral part of the student's course of study and such student is performing such behavior analysis or assisting in behavior analysis under the direct supervision of a behavior analyst, (3) is an instructor in a course approved by the Behavior Analyst Certification Board, (4) is an assistant behavior analyst working under the supervision of a behavior analyst in accordance with the standards established by the Behavior Analyst Certification Board, (5) implements an intervention based on behavior analysis under the supervision of a behavior analyst, or (6) is a family member, guardian or caretaker implementing a behavior analysis treatment plan under the direction of a behavior analyst.
- 1979 Sec. 53. (NEW) (*Effective July 1, 2018*) (a) The Commissioner of 1980 Public Health shall grant a license as a behavior analyst to any

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applicant who furnishes evidence satisfactory to the commissioner that such applicant is certified as a behavior analyst by the Behavior Analyst Certification Board. The commissioner shall develop and provide application forms. The application fee shall be three hundred fifty dollars.

(b) A license issued under this section shall be renewed in accordance with the provisions of section 19a-88 of the general statutes for a fee of one hundred seventy-five dollars. Each behavior analyst applying for license renewal shall furnish evidence satisfactory to the commissioner of having current certification with the Behavior Analyst Certification Board.

Sec. 54. (NEW) (*Effective July 1, 2018*) A person, who is not eligible for licensure under section 53 of this act, may apply for licensure by endorsement as a behavior analyst. Such applicant shall present evidence satisfactory to the commissioner that the applicant is licensed or certified as a behavior analyst, or as a person entitled to perform similar services under a different designation, in another state or jurisdiction that has requirements for practicing in such capacity that are substantially similar to, or higher than, those of this state and that there are no disciplinary actions or unresolved complaints pending.

Sec. 55. (NEW) (Effective July 1, 2018) The Commissioner of Public Health may take any disciplinary action set forth in section 19a-17 of the general statutes, as amended by this act, against a behavior analyst for any of the following reasons: (1) Failure to conform to the accepted standards of the profession; (2) conviction of a felony; (3) fraud or deceit in obtaining or seeking reinstatement of a license to practice behavior analysis; (4) fraud or deceit in the practice of behavior analysis; (5) negligent, incompetent or wrongful conduct in professional activities; (6) physical, mental or emotional illness or disorder resulting in an inability to conform to the accepted standards of the profession; (7) alcohol or substance abuse; or (8) wilful falsification of entries in any hospital, patient or other record pertaining to behavior analysis. The commissioner may order a license

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holder to submit to a reasonable physical or mental examination if his or her physical or mental capacity to practice safely is the subject of an investigation. The commissioner may petition the superior court for the judicial district of Hartford to enforce such order or any action taken pursuant to section 19a-17 of the general statutes, as amended by this act. The commissioner shall give notice and an opportunity to be heard on any contemplated action under section 19a-17 of the general statutes, as amended by this act.

- Sec. 56. Subdivision (6) of section 20-413 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July* 2024 1, 2018):
- (6) The provision of applied behavior analysis services by a [board certified] <u>licensed</u> behavior analyst or a board certified assistant behavior analyst, as such terms are defined in section 20-185i, <u>as amended by this act</u>, in accordance with section 10-76ii, <u>as amended by this act</u>.
- Sec. 57. Section 10-76ii of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2018*):

[(a)] On and after July 1, 2012, a local or regional board of education that is responsible for providing special education and related services to a child, pursuant to section 10-76a, shall provide applied behavior analysis services to any such child with autism spectrum disorder if the individualized education program or plan pursuant to Section 504 of the Rehabilitation Act of 1973 requires such services. [(1) Such services shall be provided by a person who is, subject to the provisions of subsection (b) of this section, (A) licensed by the Department of Public Health or certified by the Department of Education and such services are within the scope of practice of such license or certificate, or (B) certified by the Behavior Analyst Certification Board as a behavior analyst or assistant behavior analyst, provided such assistant behavior analyst. (2) A teacher or paraprofessional may implement the

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individualized education program or plan pursuant to Section 504 of the Rehabilitation Act of 1973 providing for such applied behavior analysis services, provided such teacher or paraprofessional is under the supervision of a person described in subdivision (1) of this subsection. For purposes of this section, "applied behavior analysis" means the design, implementation and evaluation of environmental modifications, using behavioral stimuli and consequences, including the use of direct observation, measurement and functional analysis of the relationship between the environment and behavior, to produce socially significant improvement in human behavior.

- (b) If the Commissioner of Education determines that there are insufficient certified or licensed personnel available to provide applied behavior analysis services in accordance with the provisions of subsection (a) of this section, the commissioner may authorize the provision of such services by persons who: (1) Hold a bachelor's degree in a related field; (2) have completed (A) a minimum of nine credit hours of coursework from a course sequence approved by the Behavior Analyst Certification Board, or (B) coursework that meets the eligibility requirement to sit for the board certified behavior analyst examination; and (3) are supervised by a board certified behavior analyst.
- (c)] Nothing in this section shall be construed to require the inclusion of applied behavior analysis services in an individualized education program or plan pursuant to Section 504 of the Rehabilitation Act of 1973.
- Sec. 58. Subsection (a) of section 10-145t of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July* 2073 1, 2018):
 - (a) For purposes of this section, "school support staff" means any person employed by a local or regional board of education as a [board certified] behavior analyst or [board certified] assistant behavior analyst, as such terms are defined in section 20-185i, as amended by

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2078 <u>this act,</u> athletic coach, as defined in section 10-149d, or school paraprofessional.

- Sec. 59. Subsections (a) to (c), inclusive, of section 38a-488b of the general statutes are repealed and the following is substituted in lieu thereof (*Effective July 1, 2018*):
- 2083 (a) As used in this section:

- (1) "Applied behavior analysis" means the design, implementation and evaluation of environmental modifications, using behavioral stimuli and consequences, including the use of direct observation, measurement and functional analysis of the relationship between environment and behavior, to produce socially significant improvement in human behavior.
- 2090 (2) "Autism spectrum disorder services provider" means any person, 2091 entity or group that provides treatment for an autism spectrum 2092 disorder pursuant to this section.
 - (3) "Autism spectrum disorder" means "autism spectrum disorder" as set forth in the most recent edition of the American Psychiatric Association's "Diagnostic and Statistical Manual of Mental Disorders".
 - (4) "Behavioral therapy" means any interactive behavioral therapies derived from evidence-based research and consistent with the services and interventions designated by the Commissioner of Social Services pursuant to subsection (l) of section 17a-215c, including, but not limited to, applied behavior analysis, cognitive behavioral therapy, or other therapies supported by empirical evidence of the effective treatment of individuals diagnosed with autism spectrum disorder, that are: (A) Provided to children less than twenty-one years of age; and (B) provided or supervised by (i) a licensed behavior analyst, [who is certified by the Behavior Analyst Certification Board,] (ii) a licensed physician, or (iii) a licensed psychologist. For the purposes of this subdivision, behavioral therapy is "supervised by" such licensed behavior analyst, licensed physician or licensed psychologist when

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such supervision entails at least one hour of face-to-face supervision of the autism spectrum disorder services provider by such <u>licensed</u> behavior analyst, licensed physician or licensed psychologist for each ten hours of behavioral therapy provided by the supervised provider.

- 2113 (5) "Diagnosis" means the medically necessary assessment, 2114 evaluation or testing performed by a licensed physician, licensed 2115 psychologist or licensed clinical social worker to determine if an 2116 individual has autism spectrum disorder.
- (b) Each individual health insurance policy providing coverage of the type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469 that is delivered, issued for delivery, renewed, amended or continued in this state shall provide coverage for the diagnosis and treatment of autism spectrum disorder. For the purposes of this section and section 38a-482a, autism spectrum disorder shall be considered an illness.
 - (c) Such policy shall provide coverage for the following treatments, provided such treatments are (1) medically necessary, and (2) identified and ordered by a licensed physician, licensed psychologist or licensed clinical social worker for an insured who is diagnosed with autism spectrum disorder, in accordance with a treatment plan developed by a <u>licensed</u> behavior analyst_z [who is certified by the Behavior Analyst Certification Board,] licensed physician, licensed psychologist or licensed clinical social worker, pursuant to a comprehensive evaluation or reevaluation of the insured:
- 2133 (A) Behavioral therapy;

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- 2134 (B) Prescription drugs, to the extent prescription drugs are a 2135 covered benefit for other diseases and conditions under such policy, 2136 prescribed by a licensed physician, a licensed physician assistant or an 2137 advanced practice registered nurse for the treatment of symptoms and 2138 comorbidities of autism spectrum disorder;
- 2139 (C) Direct psychiatric or consultative services provided by a

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- 2140 licensed psychiatrist;
- 2141 (D) Direct psychological or consultative services provided by a
- 2142 licensed psychologist;
- 2143 (E) Physical therapy provided by a licensed physical therapist;
- 2144 (F) Speech and language pathology services provided by a licensed
- 2145 speech and language pathologist; and
- 2146 (G) Occupational therapy provided by a licensed occupational
- 2147 therapist.
- Sec. 60. Subsections (a) to (c), inclusive, of section 38a-514b of the
- 2149 general statutes are repealed and the following is substituted in lieu
- 2150 thereof (*Effective July 1, 2018*):
- 2151 (a) As used in this section:
- 2152 (1) "Applied behavior analysis" means the design, implementation
- 2153 and evaluation of environmental modifications, using behavioral
- 2154 stimuli and consequences, including the use of direct observation,
- 2155 measurement and functional analysis of the relationship between
- 2156 environment and behavior, to produce socially significant
- 2157 improvement in human behavior.
- 2158 (2) "Autism spectrum disorder services provider" means any person,
- 2159 entity or group that provides treatment for autism spectrum disorder
- 2160 pursuant to this section.
- 2161 (3) "Autism spectrum disorder" means "autism spectrum disorder"
- 2162 as set forth in the most recent edition of the American Psychiatric
- 2163 Association's "Diagnostic and Statistical Manual of Mental Disorders".
- 2164 (4) "Behavioral therapy" means any interactive behavioral therapies
- 2165 derived from evidence-based research and consistent with the services
- 2166 and interventions designated by the Commissioner of Social Services
- 2167 pursuant to subsection (l) of section 17a-215c, including, but not

2168 limited to, applied behavior analysis, cognitive behavioral therapy, or 2169 other therapies supported by empirical evidence of the effective 2170 treatment of individuals diagnosed with autism spectrum disorder, 2171 that are: (A) Provided to children less than twenty-one years of age; 2172 and (B) provided or supervised by (i) a <u>licensed</u> behavior analyst, [who 2173 is certified by the Behavior Analyst Certification Board,] (ii) a licensed 2174 physician, or (iii) a licensed psychologist. For the purposes of this 2175 subdivision, behavioral therapy is "supervised by" such licensed 2176 behavior analyst, licensed physician or licensed psychologist when 2177 such supervision entails at least one hour of face-to-face supervision of 2178 the autism spectrum disorder services provider by such licensed 2179 behavior analyst, licensed physician or licensed psychologist for each 2180 ten hours of behavioral therapy provided by the supervised provider.

- (5) "Diagnosis" means the medically necessary assessment, evaluation or testing performed by a licensed physician, licensed psychologist or licensed clinical social worker to determine if an individual has autism spectrum disorder.
- 2185 (b) Each group health insurance policy providing coverage of the 2186 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-2187 469 that is delivered, issued for delivery, renewed, amended or 2188 continued in this state shall provide coverage for the diagnosis and 2189 treatment of autism spectrum disorder. For the purposes of this section 2190 and section 38a-513c, autism spectrum disorder shall be considered an 2191 illness.
 - (c) Such policy shall provide coverage for the following treatments, provided such treatments are (1) medically necessary, and (2) identified and ordered by a licensed physician, licensed psychologist or licensed clinical social worker for an insured who is diagnosed with autism spectrum disorder, in accordance with a treatment plan developed by a licensed behavior analyst, [who is certified by the Behavior Analyst Certification Board,] licensed physician, licensed psychologist or licensed clinical social worker, pursuant to a comprehensive evaluation or reevaluation of the insured:

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- 2201 (A) Behavioral therapy;
- 2202 (B) Prescription drugs, to the extent prescription drugs are a 2203 covered benefit for other diseases and conditions under such policy, 2204 prescribed by a licensed physician, a licensed physician assistant or an 2205 advanced practice registered nurse for the treatment of symptoms and 2206 comorbidities of autism spectrum disorder;
- 2207 (C) Direct psychiatric or consultative services provided by a 2208 licensed psychiatrist;
- 2209 (D) Direct psychological or consultative services provided by a 2210 licensed psychologist;
- 2211 (E) Physical therapy provided by a licensed physical therapist;
- 2212 (F) Speech and language pathology services provided by a licensed 2213 speech and language pathologist; and
- 2214 (G) Occupational therapy provided by a licensed occupational 2215 therapist.
- 2216 Sec. 61. Subdivision (3) of subsection (c) of section 20-112a of the 2217 general statutes is repealed and the following is substituted in lieu 2218 thereof (*Effective from passage*):
- 2219 (3) On or after [January] July 1, 2018, (A) no licensed dentist may 2220 delegate dental procedures to a dental assistant or expanded function 2221 dental assistant unless the dental assistant or expanded function dental 2222 assistant provides records demonstrating successful completion of the 2223 Dental Assisting National Board's infection control examination, 2224 except as provided in subdivision (2) of this subsection, (B) a dental 2225 assistant may receive not more than nine months of on-the-job training 2226 by a licensed dentist for purposes of preparing the dental assistant for 2227 the Dental Assisting National Board's infection control examination, 2228 and (C) any licensed dentist who delegates dental procedures to a 2229 dental assistant shall retain and make such records available for

inspection upon request of the Department of Public Health.

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Sec. 62. Subsection (f) of section 46 of public act 16-66 is repealed and the following is substituted in lieu thereof (*Effective from passage*):

(f) Not later than January 1, [2017] <u>2018</u>, the task force shall submit a report on its findings and recommendations to the joint standing committee of the General Assembly having cognizance of matters relating to public health, in accordance with the provisions of section 11-4a of the general statutes. The task force shall terminate on the date that it submits such report or January 1, [2017] <u>2018</u>, whichever is later.

Sec. 63. Sections 19a-6j to 19a-6l, inclusive, and 19a-6n of the general statutes are repealed. (*Effective October 1, 2017*)"

This act shall take effect as follows and shall amend the following					
sections:					
Section 1	October 1, 2017	19a-491(a)			
Sec. 2	October 1, 2017	19a-490			
Sec. 3	October 1, 2017	20-126l(a)			
Sec. 4	October 1, 2017	20-126l(g)			
Sec. 5	October 1, 2017	10-206(f)			
Sec. 6	October 1, 2017	19a-580d			
Sec. 7	October 1, 2017	19a-17			
Sec. 8	October 1, 2017	20-74a			
Sec. 9	October 1, 2017	20-195(a)			
Sec. 10	October 1, 2017	20-195bb(c)			
Sec. 11	October 1, 2017	20-195f(a)			
Sec. 12	October 1, 2017	19a-52			
Sec. 13	October 1, 2017	19a-53			
Sec. 14	October 1, 2017	19a-55(b)			
Sec. 15	October 1, 2017	19a-37			
Sec. 16	July 1, 2017	19a-320(a)			
Sec. 17	October 1, 2017	19a-127l(c)(1)			
Sec. 18	October 1, 2017	19a-131g			
Sec. 19	October 1, 2017	19a-491c(f)			
Sec. 20	October 1, 2017	19a-31a			
Sec. 21	October 1, 2017	19a-59c			
Sec. 22	from passage	20-74s			
Sec. 23	from passage	PA 15-242, Sec. 35			
Sec. 24	October 1, 2017	New section			

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Sec. 25	from passage	46a-28
Sec. 26	from passage	2c-2h(g)
Sec. 27	from passage	46a-29(b)
Sec. 28	from passage	19a-111i(a)
Sec. 29	from passage	19a-6i(a)
Sec. 30	July 1, 2017	22a-430(g)
Sec. 31	from passage	19a-492e(a)
Sec. 32	from passage	19a-495a(b)
Sec. 33	July 1, 2017	20-474
Sec. 34	July 1, 2017	20-476
Sec. 35	July 1, 2017	20-477
Sec. 36	July 1, 2017	20-479
Sec. 37	July 1, 2017	20-480
Sec. 38	July 1, 2017	New section
Sec. 39	July 1, 2017	19a-14(c)
Sec. 40	July 1, 2017	19a-88(e)
Sec. 41	July 1, 2017	20-439
Sec. 42	July 1, 2017	20-478
Sec. 43	October 1, 2017	19a-342
Sec. 44	October 1, 2017	19a-342a
Sec. 45	October 1, 2017	53-344(b)
Sec. 46	October 1, 2017	53-344b(b)
Sec. 47	October 1, 2017	31-40q(a)(4)
Sec. 48	from passage	New section
Sec. 49	October 1, 2017	New section
Sec. 50	July 1, 2017	19a-90
Sec. 51	July 1, 2018	20-185i
Sec. 52	July 1, 2018	New section
Sec. 53	July 1, 2018	New section
Sec. 54	July 1, 2018	New section
Sec. 55	July 1, 2018	New section
Sec. 56	July 1, 2018	20-413(6)
Sec. 57	July 1, 2018	10-76ii
Sec. 58	July 1, 2018	10-145t(a)
Sec. 59	July 1, 2018	38a-488b(a) to (c)
Sec. 60	July 1, 2018	38a-514b(a) to (c)
Sec. 61	from passage	20-112a(c)(3)
Sec. 62	from passage	PA 16-66, Sec. 46(f)
Sec. 63	October 1, 2017	Repealer section